

Zion Evangelical Lutheran Church

“A place to belong.”
101 N. Greenwood Street
Tamaqua, PA 18252



Registration Form

Student's Name: _____

Student's Age: _____ Date of birth: _____ Current Grade: _____

Name of Parent(s) or Guardian(s): _____

Street address: _____

City: _____ State: _____ Zipcode: _____

Student's Phone: (_____) _____ Receive Texts: Yes / No Email: _____

Parent's Phone: (_____) _____ Receive Texts: Yes / No Email: _____

Permission to photograph the student at church functions: Yes No

Allergy & Emergency Information:

Allergies or other medical conditions: _____

Emergency Contact 1:

Name: _____ Phone: (_____) _____ Relationship: _____

Emergency Contact 2:

Name: _____ Phone: (_____) _____ Relationship: _____

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____