



# St. Paul's Lutheran Church

3108 Sterrettania Rd, Erie, PA 16506 | 814.833.1761 | @stpaulserie

## Student Registration Form

<p><b>Choose One:</b></p> <p><input type="checkbox"/> Children's Church (pre-K-grade 3)</p> <p><input type="checkbox"/> 4/5 Club (grades 4 &amp; 5)</p> <p><input type="checkbox"/> Confirmation (grades 6-8)</p> <p><input type="checkbox"/> High School (grades 9-12)</p>
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**Student Name:** \_\_\_\_\_

Address: \_\_\_\_\_ Cell: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Email: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

School Name: \_\_\_\_\_

Baptism: \_\_\_\_\_ First Communion: \_\_\_\_\_ Confirmation: \_\_\_\_\_

**Parent/Guardian Name:** \_\_\_\_\_ Cell: \_\_\_\_\_

Address, if different: \_\_\_\_\_ Email: \_\_\_\_\_

**Parent/Guardian Name:** \_\_\_\_\_ Cell: \_\_\_\_\_

Address, if different: \_\_\_\_\_ Email: \_\_\_\_\_

**Emergency Contact Name:** \_\_\_\_\_ Cell: \_\_\_\_\_

Relationship: \_\_\_\_\_

### Medical Information

Medical Alerts, Food and/or Drug \_\_\_\_\_  
\_\_\_\_\_

Current Medications: \_\_\_\_\_

Additional information we should know: \_\_\_\_\_

Insurance Carrier: \_\_\_\_\_ Policy #: \_\_\_\_\_ Group #: \_\_\_\_\_

My student \_\_\_\_\_ has permission to participate in any activity sponsored by St. Paul's Lutheran Church for the **2024-2025** programming years. In case of an emergency, the adult in charge has authorization to seek any medical attention necessary, or to administer over the counter medications as needed by your child.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

**(MEDIA RELEASE ON REVERSE SIDE)**

**MEDIA RELEASE**

Per the Boundary Guidelines of St. Paul's, we will only communicate with parents and not pre-K-grade 5 students. We will use the following parental consent to communicate with grade 6-12 students. We will NOT use Snapchat to communicate with students.

I grant permission to St. Paul's Lutheran Church to text and use Remind App, Facebook and/or Instagram to communicate with my student.

Yes                       No

Restricted to: \_\_\_\_\_  
(Example: text only, text and Facebook only)

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

**PHOTO RELEASE**

I grant permission to St. Paul's Lutheran Church to use the image of my student. Such uses include printed materials, videos, website, Facebook, and digital images for the **2024-2025** programming year.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date