## IPC Zurich

## **IPC Sunday School Registration 2024-25**

## \*Please print CLEARLY and fill out COMPLETELY\*

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Ch Mi	nict ru			out up to the solid please fill out comp	,	
	nily (Last) Name:				•	
	,					
Mo	ther's First Name:		Fathe	r's First Name:		
Mot	ther tongue:		Other lar	guages:		
	Child's First Name		Date of Birth DD/MM/YYYY	Special needs or Allergies		
Mot	ther's Mobile:		Fath	er's Mobile:		
Add	dress:					
•	PLZ City	Home Phone:				
Em	ail:					
	ould like to receive 'es □ No	the all-c	church newslett	er by email.		
I ar	n interested in bec	oming a	Sunday Schoo	or Nursery:		
□T	eacher   Assist	ant	□ Safety Officer			
In o eve zuri	tures with my child our monthly IPC e-new nts or the children's cl ch.org if you don't wa wase note that we will ne	sletter we noir. Pleas <b>ant pictu</b> i	would like to inclose let us know by res of your child	writing to sundayso		
Sig	ned:			Date:	/	

## **PLEASE NOTE:**

IPC Sunday School is run and staffed by volunteers. While we try our best to serve the congregation, and to ensure a safe environment for our children, we do not guarantee a program and outcome satisfying to all parents and children. Parents are expected to have health, accident and liability insurance for their children. IPC Sunday School does not provide insurance coverage for students, and we refuse all liability for any accident that may occur under our supervision during school hours. Completion of this registration form will constitute your acceptance of and agreement to these terms and conditions.