

**2024-2025 St. David's Episcopal Church, Cranbury, NJ
Sunday School Enrollment Application, Consent Form, and Liability Waiver**

Parent Name: _____

Street Address: _____ Phone Number: _____

City/State/Zip: _____ Email Address: _____

I, the undersigned, hereby consent to my child participating in the Sunday School program at St. David's, and to the use of my child(ren)'s name(s), voice recording(s), and photograph(s) / likeness(es) in any and all videotapes, photographs, slides, audiotapes, or any other visual or audio reproduction in which my child may appear, alone or with others, for St. David's Episcopal Church. I understand that these materials may be used for various purposes, including but not limited to marketing, and providing information and/or updates on the website of the Lifelong Christian Formation Program of St. David's which includes evangelism.

I have read, understand, and agree to abide by St. David's masking and distancing guidelines, which may be updated from time to time.

I hereby release and hold harmless St. David's and its staff, representatives, and teachers, from any and all claims, liabilities, expenses and damages that may be connected, directly or indirectly, with: (a) my child(ren) attending Sunday School at St. David's, and (b) the use of my child(ren)'s name(s), photograph(s)/likeness(es), and/or voice recording(s) hereunder.

Signed _____ Date _____
Parent / Guardian of the child[ren] printed below

Please bring completed forms on Sept. 8 or you can leave in Sunday School mailbox in the church office.

Child's name: _____

DOB: _____ Grade as of Sept. 2024: _____

Allergies/Special Instructions: _____

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Calendar of Events 2024-2025

Sept: 8, 15, 22, 29

Oct: 6, 13, 20, 27 (can wear costumes)

Nov: 3, 10, 17

Dec: 1, 8, 15, 22

Jan: 5, 12, 19, 26

Feb: 2, 9, 16, 23

March: 2, 9, 16, 23, 30

Apr: 6, 13, 27

May: 4, 11, 18

Jun: 1