



**St. Paul's Anglican Church**  
**God Squad Registration**  
**(For Children and Youth Aged 4 to 14)**

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

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

Child's Birth Date: \_\_\_\_\_ Age: \_\_\_\_\_

Baptized: YES \_\_\_\_\_ NO \_\_\_\_\_

Parental Contact: \_\_\_\_\_

Parent's Email: \_\_\_\_\_

Telephone: (H) \_\_\_\_\_ Cell \_\_\_\_\_

We attend the: 9:15 AM \_\_\_\_\_ 11:00 AM \_\_\_\_\_

Medical Notes: (Please include any food/life threatening allergies):  
 \_\_\_\_\_

Epi Pen YES \_\_\_\_\_ NO \_\_\_\_\_

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

Date: \_\_\_\_\_

**God Squad**

**Permission Form**

**Signature of Parent/Guardian Required)**

At "The God Squad" we sometimes take pictures of children for use only at special presentations. Some of the pictures may be used for these presentation purposes.

I Give permission for \_\_\_\_\_

To have his/her picture taken during class times and at these special events.

\_\_\_\_\_  
 Signature of Parent/Guardian Date

**VOLUNTEERING to Teach or Help in our Sunday School.**

Our Diocese insists that all who work or volunteer with the vulnerable section of our community—in this case our Children—must have a Valid/Current Police Records Check. Please ensure yours is on file in the Church Office.



YES, I can help in the following areas:

Class Helper \_\_\_\_\_

Class Teacher \_\_\_\_\_

Special Events \_\_\_\_\_

QUESTIONS? [sundayschool@stpaulshk.org](mailto:sundayschool@stpaulshk.org) or the office 613-836-1001