



2011-2012 GodZone Registration

Shepherd of the Valley Lutheran Church
12650 Johnny Cake Ridge Road
Apple Valley, MN 55124
(952) 432-6385/www.sotv.org

Last Name _____ First Name _____ Middle Name _____

Goes by _____ Date of Birth _____ Male _____ Female _____

Father's (Guardian) Name _____ Cell Phone _____

Mother's (Guardian) Name _____ Cell Phone _____

Child lives with: Both Parents _____ Mother _____ Father _____ Other _____

If other, please list name and relationship _____

Child's Primary Residence _____
Street City/State Zip

Primary Phone _____ Primary E-mail _____

Has your child been baptized? Yes _____ No _____ Date of Baptism _____

Allergies/Common Health Concerns: _____

Please Note: Children's Ministry is partnering with SAIL, the SOTV special needs task force, to proactively support GodZone families who have children with special needs. Please complete a **SAIL** form (available online or at the Welcome Center) if you are seeking accommodations for your child. Questions? Please contact Mim Campbell.

The GodZone registration fee is \$45. Please make checks payable to Shepherd of the Valley Lutheran Church (SOTV). Scholarships are available.

I would like a scholarship \$ _____ I would like to contribute to a scholarship in the amount of \$ _____

Please circle your child's age or grade as of September 1, 2011

To help us in our planning, please have registrations in before August 31, 2011

3 Years Old by 9/1/2011- 9:45 FULL	4 Years Old 9:45 FULL	Kindergarten	1st Grade
2nd Grade	3rd Grade	4th Grade (Zone 45)	5th Grade (Zone 45)

Please list your first, second and third choice for GodZone classes

If a class is FULL and you would like to be put on the waiting list, please mark that as your FIRST choice.

Sunday 8:30 AM _____ Sunday 9:45 AM _____ Sunday 11:00 AM _____

Wednesday 4:30 PM _____ Wednesday 5:45 PM _____

Special Request _____

Registration is on a first come basis. It is your responsibility to coordinate times and days with friends and teachers.

Office Use Only

Date/Time Rec'd: _____ Paid: _____ Entered: _____ Assigned: _____