Seekonk Congregational Church
Sunday School Enrollment Information
2026-2027

Please fill one out per child

Child's Name:_____ **DOB:**_____

Address:_____

City/State: **Zip Code:**

Baptized:_____Yes _____No_____If Yes Date of Baptism:_____

As of SEPTEMBER 2026 (circle one): Nursery (Birth to 2YR,) Preschool 3YR/ 4YR Kindergarten

(circle one): 1st 2nd 3rd 4th 5th 6th 7th 8th 9th 10th 11th 12th

* Confirmation Class is offered for 9th grade and above*

* Like us on Facebook… We are now posting our amazing church activities and events on social media. Please indicate to the office if you need to opt out of having you or your child's picture posted. (508-336-9355) SEEKONKCONGREGATIONALCHURCHUCC@GMAIL.COM

- **EMAILS ARE SENT WEEKLY, PLEASE ADD SCC.UCC.CHRISTIANED@GMAIL.COM TO YOUR CONTACT LIST SO YOU DO NOT MISS ANY IMPORTANT INFORMATION!**

Parent/Guardian Name:_____

Parent/Guardian E-mail address:_____

Parent/Guardian Phone:_____

Circle one:

What is the best way for you to receive information? Text E-mail

Would you be interested in volunteering? Yes No

Parent/Guardian Name:_____

Parent/Guardian E-mail address:_____

Parent/Guardian Phone:_____

Circle one:

What is the best way for you to receive information? Text E-mail

Would you be interested in volunteering? Yes No

See Reverse Side

Does your child have any allergies/ special needs? Yes No

Please explain:_____

What does your child enjoy doing outside of church?_____

What would you like us to know about your child?_____

_____

_____

_____

What would you like your child to learn in Sunday School?_____

_____

Please mail completed form to:

Seekonk Congregational Church
600 Fall River Avenue
Seekonk, MA 02771

Digital forms are available on our website:

www.scc-ucc.com