HOLY MOTHER QUEEN OF ALL
PANAGIA PANTOVASILISSA GREEK ORTHODOX CHURCH
3001 Tates Creek Road, Lexington, KY 40502
(859) 266-1921 ▪ www.goclex.com

Sunday Church School Registration 2026-2027

I, _____, request to have my child/children
(parent/guardian first & last name)
enrolled in Sunday Church School at Holy Mother Queen of All – Panagia Pantovasilissa Greek Orthodox Church.

PARENT/GUARDIAN INFORMATION

Home phone _____ Cell _____ Email _____

Address _____
Street City State Zip

Date _____ Parent/Guardian Signature _____

STUDENT #1 INFORMATION

Name _____
(student first & last name)
Date of birth _____ Age _____ Grade _____ School _____

Allergies/health conditions/concerns/anything else for the teacher to be aware of?

_____

STUDENT #2 INFORMATION (see reverse to add more children)

Name _____
(student first & last name)

Date of birth _____ Age _____ Grade _____ School _____

Allergies/health conditions/concerns/anything else for the teacher to be aware of?

_____

Sunday Church School Registration 2026-2027

(continued)

STUDENT #3 INFORMATION

Name _____
(student first & last name)

Date of birth _____ Age _____ Grade _____ School _____

Allergies/health conditions/concerns/anything else for the teacher to be aware of?

_____

STUDENT #4 INFORMATION

Name _____
(student first & last name)

Date of birth _____ Age _____ Grade _____ School _____

Allergies/health conditions/concerns/anything else for the teacher to be aware of?

_____

STUDENT #5 INFORMATION

Name _____
(student first & last name)

Date of birth _____ Age _____ Grade _____ School _____

Allergies/health conditions/concerns/anything else for the teacher to be aware of?

_____