

DATE: _____		SERVICE(S) ATTENDED	
____ 8:00 AM (Preschool Care Only)	____ 9:15 AM Sunday School	____ 10:30 AM Preschool Care	
____ Sunday night	____ Wednesday night		

I am (check all that apply) ☐ First time guest ☐ New to area ☐ Out of town guest
 ☐ Repeat guest ☐ Visiting family

Office Use Only – Sunday School Assignment