



Sts Kiril & Metodij

Macedonian Orthodox Church

Sunday school Application

WillowBrook IL USA

We would like to enroll our child/children in the Macedonian Orthodox Church “STS KIRIL I METODIJ “
Sunday school

Child Information

First and Last name: _____ AGE _____

Macedonian Language skills

Reading NONE SOME FLUENT **Writing** NONE SOME FLUENT **Speaking** NONE SOME FLUENT

Child Information

First and Last name: _____ AGE _____

Macedonian Language skills

Reading NONE SOME FLUENT **Writing** NONE SOME FLUENT **Speaking** NONE SOME FLUENT

Child Information

First and Last name: _____ AGE _____

Macedonian Language skills

Reading NONE SOME FLUENT **Writing** NONE SOME FLUENT **Speaking** NONE SOME FLUENT

Child Information

First and Last name: _____ AGE _____

Macedonian Language skills

Reading NONE SOME FLUENT **Writing** NONE SOME FLUENT **Speaking** NONE SOME FLUENT

Parents Information

First and Last name: _____

Address: _____

City: _____ State: _____ Postal Code: _____

Telephone No.: () _____ - _____ E-Mail Address: _____

Guardian Signature: _____ **Today Date** ____/____/20__