



Vacation Bible School Registration Form (July 27 – 31, 9am -12pm)
Registration Fee: \$20.00 per child; \$50 per family

Child's Name: _____ T-shirt size _____

Parent/Guardian Name: _____

Address: _____

Home Telephone: _____ Cell Phone: _____

Home e-mail address: _____

Child's age _____ Last school grade completed _____

Home congregation (if any) _____

In case of emergency (when the parent/guardian cannot be reached) please contact

Name _____

Relationship to child _____

Please list any allergies the VBS staff should be aware of:

(Include food allergies) _____

Person responsible for picking up this child at the end of each VBS day:

Name: _____

Telephone number: _____

Signature of parent/guardian: _____

I you would like to volunteer, please let us know! Yes or Not at this time.

Please register before July 21st