

Vacation Bible School Participant  
Registration Form

For ages 3 through 5<sup>th</sup> Grade

June 18-22 from 6:00-9:00 pm



Family Name \_\_\_\_\_

Name \_\_\_\_\_ Grade Completed Spring 2018 \_\_\_\_\_

Name \_\_\_\_\_ Grade Completed Spring 2018 \_\_\_\_\_

Name \_\_\_\_\_ Grade Completed Spring 2018 \_\_\_\_\_

Mother \_\_\_\_\_ Cell \_\_\_\_\_

Father \_\_\_\_\_ Cell \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Preferred Phone \_\_\_\_\_ c/h/w E-mail \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

Allergies/Medical Conditions (Please list the child along with his or her condition) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Who has permission to pick your child(ren) up from VBS?

\_\_\_\_\_

Do we have permission to take pictures of your child(ren) to display in Church? **Y N**

**Every child will be provided with an iron-on transfer to be put on a light-colored T-shirt (white is suggested). Each family will be given a CD with the VBS music.**

For Volunteers Use Only:

CD given upon Registration **YES NO**