



Vacation Bible School **K-5**

Registration Form

June 11-15, 2018 (9:00 am to Noon)

Name: _____ DOB: _____ T-shirt size: _____ Grade: _____

Name: _____ DOB: _____ T-shirt size: _____ Grade: _____

Name: _____ DOB: _____ T-shirt size: _____ Grade: _____

Name of Parent(s): _____

Street Address: _____

City: _____ State: _____ ZIP: _____

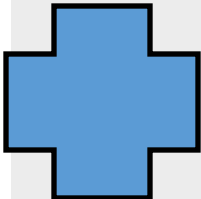
Home telephone: ____ (____) _____

Parent/caregiver's cell phone: ____ (____) _____

Home email address: _____

Fee: \$40 per child. Families of 3 or more fee is \$90 per family.

Allergies or other medical conditions: _____



In case of emergency, contact: _____

Phone: _____

Relationship to child: _____

Crew number or name (for church use only): _____