



# 2018 VBS REGISTRATION

For kids who have completed K - 5th grade

## PARENT/GUARDIAN CONTACT INFORMATION

Parent or Guardian: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Emergency contact: \_\_\_\_\_ Phone: \_\_\_\_\_

## CHILD(REN) INFORMATION

I am a guest of \_\_\_\_\_ K 1 2 3 4 5

Child's Name \_\_\_\_\_

FOR OFFICE ONLY | CREW:

Birthdate (month/day/year) \_\_\_/\_\_\_/\_\_\_ Last grade completed K 1 2 3 4 5

Allergies / Special Instructions \_\_\_\_\_

Child's Name \_\_\_\_\_

FOR OFFICE ONLY | CREW:

Birthdate (month/day/year) \_\_\_/\_\_\_/\_\_\_ Last grade completed K 1 2 3 4 5

Allergies / Special Instructions \_\_\_\_\_

Child's Name \_\_\_\_\_

FOR OFFICE ONLY | CREW:

Birthdate (month/day/year) \_\_\_/\_\_\_/\_\_\_ Last grade completed K 1 2 3 4 5

Allergies / Special Instructions \_\_\_\_\_

## ADDITIONAL INFORMATION

List who will be signing your child(ren) out: Must be an adult 18 years or older.

Name: \_\_\_\_\_ relationship to child(ren) \_\_\_\_\_

Name: \_\_\_\_\_ relationship to child(ren) \_\_\_\_\_

Name: \_\_\_\_\_ relationship to child(ren) \_\_\_\_\_

Do you attend church?  YES  NO If YES, where? \_\_\_\_\_

Do you give your permission for your child to be photographed during VBS?  YES  NO