



June 10th - 14th

8:45am-12:15pm

Cost: \$25

Registration Form

(one per child)

Child's name: _____ Male Female

Child's age: _____ Date of birth: _____ Last school grade completed: _____

Child's shirt size: YXS YS YM YL AS AM

Name of parent(s): _____

Street address: _____ City: _____

Parent/caregiver's cellphone: (____) _____

Email address: _____

Other than parent(s)/caregiver listed, who else is authorized to pick up child from VBS? (name & phone)

Allergies or other medical conditions: _____

In case of emergency, contact: _____

Phone: (____) _____ Relationship to child: _____

Crew name (for church use only): _____