

# Vacation Bible School Registration



**VBS Dates:** Jun 3rd - Jun 6th **Location:** 182 Jellystone Pwky, Bostic, NC 28018

Child's Name: \_\_\_\_\_ (One form per child please)

Grade Completed: \_\_\_\_\_ Birthday: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Age: \_\_\_\_\_

Parent's Name(s): \_\_\_\_\_

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

Home Phone: (\_\_\_\_\_) \_\_\_\_\_ Alternate Phone: (\_\_\_\_\_) \_\_\_\_\_

Emergency Contact Person: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

Home Phone: (\_\_\_\_\_) \_\_\_\_\_ Alternate Phone: (\_\_\_\_\_) \_\_\_\_\_

Food Allergies:  Yes  No - If yes, list: \_\_\_\_\_

Medical Concerns:  Yes  No - If yes, explain: \_\_\_\_\_

## Siblings Attending VBS (Names and Ages):

1. Name: \_\_\_\_\_ Age: \_\_\_\_\_
2. Name: \_\_\_\_\_ Age: \_\_\_\_\_
3. Name: \_\_\_\_\_ Age: \_\_\_\_\_
4. Name: \_\_\_\_\_ Age: \_\_\_\_\_
5. Name: \_\_\_\_\_ Age: \_\_\_\_\_

Transportation Needed:  Yes  No

Thank you for giving us the opportunity to teach your child(ren) more about God and give them the opportunity to have fun at the same time that they learn!

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_