

Vacation Bible School Registration Card
2008

Student's Name _____ Birth Date _____
Age on July 1, 2008 _____ Last grade completed _____

Known allergies or other medical concerns the VBS staff should
be aware of: _____

Parent's Name _____
Home Address _____

Parent Phone Numbers:

Home _____
Mom's Work _____ Dad's Work _____
Mom's Cell _____ Dad's Cell _____
Email address: _____

Emergency Contact (to be used if parents cannot be reached)

Name: _____ Phone _____
Relationship to child: _____

Health Care phone _____

Person responsible for picking up this child at the end of each VBS day.

Name: _____ PhoneNo. _____
Signature of parent/guardian: _____

Please circle Youth T shirt size -

S(6-8) M(10-12) L (14-16) XL (18-20)