

Vacation Bible School
Registration Form
Preschool - 6th grade (completed)



Child's name _____

Grade (just completed) _____ Age _____

Parent/Guardian's Name _____

Home address _____

City _____ State/Zip _____

Home phone _____ Cell phone _____

Do you have a church home? _____ If so, where? _____

Do you give permission for your child to be photographed or videotaped for promotional purposes of FBCC? **YES or NO**

Allergies/Special Needs _____

Emergency Contact

Name _____ Number _____

Is transportation needed? **YES or NO**

Parent Signature _____ Date _____

Use form below for additional child

Child's name _____

Grade (just completed) _____ Age _____

Parent/Guardian's Name _____

Home address _____

City _____ State/Zip _____

Home phone _____ Cell phone _____

Do you have a church home? _____ If so, where? _____

Do you give permission for your child to be photographed or videotaped for promotional purposes of FBCC? **YES or NO**

Allergies/Special Needs _____

Emergency Contact

Name _____ Number _____

Is transportation needed? **YES or NO**

Parent Signature _____ Date _____