

# Western Avenue Baptist Church

## REGISTRATION FORM

### 2019 VACATION BIBLE SCHOOL

For Children age 5 to adult

June 17<sup>th</sup> - June 21<sup>st</sup>

6:30 pm until 8:30 pm



Name of Child: \_\_\_\_\_ Age \_\_\_\_\_ M/F (circle one)

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

City \_\_\_\_\_ STATE \_\_\_\_\_ Zip \_\_\_\_\_ E-mail \_\_\_\_\_

Church Affiliation \_\_\_\_\_

Name of parent or guardian: \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Emergency contact if parent or guardian is unavailable \_\_\_\_\_

Medical conditions or allergies? \_\_\_\_\_

I give my child permission to participate in all activities during Western Avenue Baptist Church, Vacation Bible School. I agree that WABC will not be held responsible for accidents or persons injured arising there from. I also realize that my child may be in photographs taken during the Vacation Bible School week. I waive the right to inspect or approve the photo if used for publications or publicity.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Western Avenue Baptist Church

13024 N. Western Avenue Okc, Ok , 73114 405-749-0499

Enrollment accepted by \_\_\_\_\_ Date \_\_\_\_\_