



**Vacation Bible School**  
**June 18-22, 2018**  
**First Church Deland**  
**115 E. Howry Ave.**

**Registration Form**

Please complete a **separate**  
Registration Form for EACH child.

Child's name: \_\_\_\_\_

Age: \_\_\_\_\_ (Must be 4 by June 18) Birthday: \_\_\_\_/\_\_\_\_/\_\_\_\_

Street address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Home telephone: (\_\_\_\_\_) \_\_\_\_\_

Parent/Caregiver's cell phone: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Grade entering Fall 2018: \_\_\_\_\_

In case of emergency, contact: \_\_\_\_\_

Mother: \_\_\_\_\_

Father: \_\_\_\_\_

Other: \_\_\_\_\_

Allergies or other medical conditions: \_\_\_\_\_

Name of Home church: \_\_\_\_\_



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