



Parkview Christian Church  
2018 VBS  
June 24-28  
6:00-8:30 p.m.

## Registration Form

STUDENT'S NAME: \_\_\_\_\_

STUDENT'S AGE: \_\_\_\_\_ GRADE COMPLETED: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PARENT/GUARDIAN NAME: \_\_\_\_\_

PARENT/GUARDIAN EMAIL: \_\_\_\_\_

EMERGENCY CONTACT NUMBER: \_\_\_\_\_

ALLERGIES OR SPECIAL NEEDS: \_\_\_\_\_

**SHIRT SIZE  
(PLEASE CIRCLE ONE):**

- |                   |                   |
|-------------------|-------------------|
| Youth Extra Small | Youth Extra Large |
| Youth Small       | Adult Small       |
| Youth Medium      | Adult Medium      |
| Youth Large       | Adult Large       |