

VBS 2019 REGISTRATION FORM

MARANATHA CRC
735 Frontenac Cres
Woodstock ON N4V 0B1



July 8-12 & Sunday July 14
9am-12pm
Ages: Going into SK to Grade 5
\$8/person or \$20/family

CONTACT INFORMATION

Parent/ Guardian Name: _____

Phone#: _____

Cell Phone#: _____

Address: _____

Email: _____

Emergency Contact: _____ Phone#: _____
(other than listed above)

Child #1:

Name: _____

Grade as of September _____

Allergies/Health Concerns and food allergies

Health Card Number: _____

Name of a friend your child would like to be with: _____

Child #2:

Name: _____

Grade as of September _____

Allergies/Health Concerns and food allergies

Health Card Number: _____

Name of a friend your child would like to be with: _____

Child #3:

Name: _____

Grade as of September _____

Allergies/Health Concerns and food allergies

Health Card Number: _____

Name of a friend your child would like to be with: _____

Your child is asked to wear running shoes – for safety reasons there are no flip flops or sandals allowed.

Email completed form to: j_timmerman10@hotmail.com