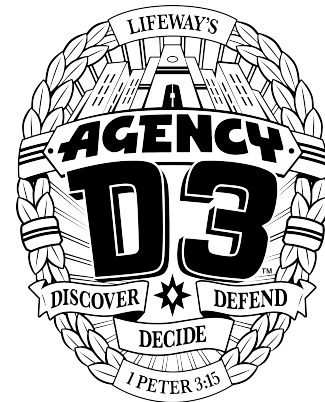


VBS

REGISTRATION

JULY 20-24



Child 1 – Name: _____ Gender: _____ Grade Completed: _____

Birthdate: _____ / _____ / _____ Allergies: _____

VBS T-Shirt \$10 (Circle One): YXS YS YM YL AS AM AL AXL A2XL A3XL

Child 2 – Name: _____ Gender: _____ Grade Completed: _____

Birthdate: _____ / _____ / _____ Allergies: _____

VBS T-Shirt \$10 (Circle One): YXS YS YM YL AS AM AL AXL A2XL A3XL

Child 3 – Name: _____ Gender: _____ Grade Completed: _____

Birthdate: _____ / _____ / _____ Allergies: _____

VBS T-Shirt \$10 (Circle One): YXS YS YM YL AS AM AL AXL A2XL A3XL

Parent 1 – First: _____ Last: _____

Parent 2 – First: _____ Last: _____

Address – _____ City: _____ Zip: _____

Phone Numbers – Parent 1: _____ Circle One: Home Cell

Parent 2: _____ Circle One: Home Cell

Email – _____ Can we email you? YES NO

Authorized Caretaker/Guardian – _____ Phone: _____
(Other than listed above.)