



## 2022 VBS Registration Form

**One form per child please**

**June 27th to July 1st 9:00 AM - Noon**

Child's Name \_\_\_\_\_

Grade Completed \_\_\_\_\_ Birthday \_\_\_\_\_

Parent's Name \_\_\_\_\_

Home Address \_\_\_\_\_

Home phone \_\_\_\_\_ Alternate phone \_\_\_\_\_

Email address \_\_\_\_\_

Emergency contact person \_\_\_\_\_ Relationship \_\_\_\_\_

Home phone \_\_\_\_\_ Alternate phone \_\_\_\_\_

Food Allergies Y N List: \_\_\_\_\_

Medical Concerns Y N Explain: \_\_\_\_\_

Family Doctor \_\_\_\_\_

Siblings attending VBS (Names & Ages) \_\_\_\_\_

\_\_\_\_\_

People who may pick up your child \_\_\_\_\_

Church affiliation \_\_\_\_\_

**VBS leaders have permission to photograph/film the minor(s) designated above in any manner or form for any lawful purpose associated with the VBS program**

**YES \_\_\_\_\_ No \_\_\_\_\_**

Parent's signature \_\_\_\_\_