

VACATION BIBLE SCHOOL – REGISTRATION FORM

July 25 – July 29 6:30 – 9:00 p.m.

Ages 3\* through 7<sup>th</sup> Grade

Registration Date \_\_\_\_\_

Name of Child \_\_\_\_\_ Birth

Date \_\_\_/\_\_\_/\_\_\_

Name of Parent(s) or Guardian(s) \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_ e-mail \_\_\_\_\_

Grade Completed in June \_\_\_\_\_ Preschool Age \_\_\_\_\_ List types of group activities your preschooler has experienced. \_\_\_\_\_

St. Matthew's UMC Member? \_\_\_\_\_ Other Church Name \_\_\_\_\_

Name and Telephone Number of Person to Contact in Case of Emergency:

\_\_\_\_\_  
*Please place form in VBS box in Narthex.*

*\*Three by September 1, 2010 and potty-trained.*

*(Rev. 05/18/11)*

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