



Sunday, July 15 – Wednesday, July 18, 2018

Ages of Participants: 4 (at time of VBS) through 5th grade (going into 6th)

VBS REGISTRATION FORM

(One Per Child)

Child's Name: _____

Child's Age: _____ Date of Birth: _____ Grade (going into): _____

Name of Parent(s): _____

Street Address: _____

City: _____ State: _____ ZIP: _____

Home Telephone: _____ Parent(s) Cell Phone: _____

Home E-mail Address: _____

Home Church: _____

In Case of Emergency, Contact: _____

Relationship to Child: _____

Allergies or Other Medical Conditions: _____

PARENTS: We Need Your Help!!! ***We need 40+ volunteers for crew leaders. A crew leader follows a group of kids from station to station, no lesson planning!***

Please Volunteer for One or More of the Following:

Name of Volunteer(s): _____

Crew Leader (name) _____

Other Ways To Help

Donate Food or \$ for meals/supplies Clean up After Meals (vacuum, etc.)

Day that works best _____

Are you in need of daycare to assist with any of the above functions? _____

I give permission for Dells Community VBS to take pictures of my child for possible posting on church related publications. ____ Yes ____ No

REGISTER YOUR CHILD BY JULY 10TH TO BE ENSURED A SPOT!