



# Vacation Bible School Student Registration Form

(please complete one form for each child enrolled)

**June 13-17, 2016**

**9am-Noon**

**\$30/child, \$25 for each additional sibling**

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

Enter Grade \_\_\_\_\_ Birthday \_\_\_\_\_ Age \_\_\_\_\_  
(for 16/17 year) (must be 3 by June 1, 2016 & potty trained)

Parents' Name \_\_\_\_\_

Parents' Email \_\_\_\_\_

Home Address \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Emergency Contact person \_\_\_\_\_

Relationship to student \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

## **MEDICAL INFORMATION**

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

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

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

Siblings attending VBS (Names & Ages)

\_\_\_\_\_

Church Affiliation (Lutheran, Catholic, Non –denominational)

Church Membership at \_\_\_\_\_

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

VBS Leaders have permission to photograph/film the minor designated above in any manner or for for any lawful purpose associated with this VBS

Parent Signature \_\_\_\_\_

Make checks payable to **St. Matthew Lutheran Church. \$30/child, \$25 for each additional sibling.**  
*Adult volunteers with children attending VBS will not be charged for their child(ren)'s enrollment (but still fill out a registration form for each child).*