



# REGISTRATION FORM

(One per Child)

Trinity Lutheran Church and Toccoa Presbyterian Church  
Toccoa, Georgia 30577  
706.886.6723 OR 706.886.3680  
www.trinitytoccoa.com OR www.toccoapresbyterian.org

Preschool-6th Grade  
JULY 16-JULY 20

9AM - Noon

Child's name: \_\_\_\_\_

Child's age \_\_\_\_\_ Date of birth: \_\_\_\_\_ Last grade completed \_\_\_\_\_

Name of parent(s): \_\_\_\_\_

Street address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Telephone: (\_\_\_\_\_) \_\_\_\_\_

Parent/Caregiver's cell phone: (\_\_\_\_\_) \_\_\_\_\_

Home e-mail address: \_\_\_\_\_

Home church: \_\_\_\_\_

Crew Name (for church use only) \_\_\_\_\_

Allergies or other medical conditions: \_\_\_\_\_



In case of Emergency, contact: \_\_\_\_\_

Phone: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Transportation with: \_\_\_\_\_

Siblings at VBS \_\_\_\_\_

\*\*\*Permission to photograph child for VBS use—keepsake picture and snapshot for bulletin board and video \_\_\_\_\_ yes \_\_\_\_\_ no

Closing Ceremony on Friday # \_\_\_\_\_ Pizza Lunch# \_\_\_\_\_

