

VBS Registration Form

June 19-23 9:00am - noon, One form per child: ages K through 6th grade



Child's Name _____

Grade entering in the fall _____ Birth date _____

Shirt Size: YXS YS YM YL YXL AS

Contact Information:

Parent/Guardian Name _____

Phone number(s) _____

Email _____

Address _____

Medical Information:

Medical or other information we need to know. Please include any food allergies.

Emergency Contacts (other than listed above):

Name _____ Phone number _____

Name _____ Phone number _____

Dismissal Information:

Who may pick up your child at the end of each VBS day?

Other Information:

Does your child attend Sunday School? If so where?

If your child is visiting our church, who is he a guest of?

May we have permission to photograph your child? Yes ____ No ____

May we have permission to use your child's photograph for the purpose of promotion? Yes ____ No ____

Return this form to the NCF Welcome Center VBS box by June 11th or earlier.