

Family Registration Form

VACATION BIBLE SCHOOL 2018

Christ the King Catholic Church June 25-29; 9am-12:00pm

- Fee must accompany registration and is non-refundable • Checks payable : CHRIST THE KING
- Registration starts May 18, 2018 and will end JUNE 18, 2018

Father's Name \_\_\_\_\_ Phone \_\_\_\_\_

Mother's Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City/Zip \_\_\_\_\_

Email Address \_\_\_\_\_

(Please use a valid email address as this is the main form of VBS communication.)

Member of Christ the King? Yes \_\_\_ NO \_\_\_

PLEASE SPECIFY ANY SPECIAL NEEDS (MEDICAL, FOOD OR LEARNING) FOR YOUR CHILD, ON THE BACK OF THIS FORM.

Please indicate below whether or not you give your permission for your child's photo to be used in such a way. \_\_\_ I grant permission for my child(ren)'s picture to be used in parish publications, displays or on the website. \_\_\_ I do not grant permission for my child(ren)'s picture to be used in the parish publications, displays, or on the website. \_\_\_ MY CHILD(REN) HAVE PERMISSION TO ATTEND VACATION BIBLE SCHOOL.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

\*\*Please Complete Other Side

\_\_\_\_\_ \$20 One Child    \_\_\_\_\_ \$30 Two Children    \_\_\_\_\_ \$40 Three or More Children

**Emergency Contact**

**Name:** \_\_\_\_\_

**Relation:** \_\_\_\_\_

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

| First Name | Last Name | M/F | Date of Birth | Age | Grade<br>Fall 2018 | t-shirt<br>Size |
|------------|-----------|-----|---------------|-----|--------------------|-----------------|
|            |           |     |               |     |                    |                 |
|            |           |     |               |     |                    |                 |
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|            |           |     |               |     |                    |                 |
|            |           |     |               |     |                    |                 |

What to Bring: 1-2 Packages of wrapped treats to share and 1-2 packages of juice boxes

What to Wear: Closed toe tennis shoes, t-shirt, shorts, socks. (Please have modest clothes that do not show bare skin belly or bottom or under clothes) Wear your own sunscreen before you arrive.

\*\*\*\*\*OFFICE USE ONLY \*\*\*\*\*

Date\_\_\_\_\_

Check #\_\_\_\_\_

Cash \_\_\_\_\_

Parent Volunteer: Yes \_\_\_ No \_\_\_

Amount\_\_\_\_\_

Teen Volunteer: Yes \_\_\_\_\_