



registration form

(One per child)

Child's name: _____ Child's gender: _____

Child's age: _____ Date of birth: _____ Last school grade completed: _____

Name of parent(s): _____

Street address: _____

City: _____ State: _____ ZIP: _____

Home telephone: (____) _____

Parent/caregiver's cellphone: (____) _____

Home email address: _____

Home parish: _____

Allergies, medical conditions, or special needs: _____



In case of emergency, contact: _____

Phone: _____

Relationship to child: _____

VACATION BIBLE SCHOOL - June 10 - 14, 9 a.m. - Noon, Ages 4 - 11
\$20 per child \$10 each sibling Scholarships available - just ask!
Bring completed forms with payment to the parish office.