

VBS Registration Form---*Clean Water for All God's Children*

June 26-June 30 2017

Warner Memorial Presbyterian Church

Children ages four to ten

Child's name: _____

Parent/Guardian name: _____

Address: _____

Home phone: _____ Cell phone: _____

E-mail address: _____

Child's age (as of June 15, 2017) _____ Last school grade completed: _____

Home congregation: _____

In case of emergency (if parent/guardian cannot be reached) please contact:

Name: _____

Telephone: _____ Relationship to child: _____

Please list any allergies (including food allergies) the VBS staff should be aware of:

Person who will pick child up at the end of each VBS day:

Name: _____

Phone number: _____

Parent/Guardian signature: _____

(Please enclose a check for \$25.00, made out to Warner Memorial Church
For each child registered and leave in the church office)

(for office use only: Date registration and payment received _____)