

# VBS Registration Form 2010

**Child's Name** \_\_\_\_\_

**Parent/Guardian Name** \_\_\_\_\_

**Address** \_\_\_\_\_

**Mailing Address (if different)** \_\_\_\_\_

**Phone Numbers:**

Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Age Information:**

Birth date \_\_\_\_\_

Next year I will be in the \_\_\_\_\_ grade (2010-11 school year)

**Medical Information:**

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Emergency Contact:**

Name \_\_\_\_\_ Phone number \_\_\_\_\_

Name \_\_\_\_\_ Phone number \_\_\_\_\_

**Dismissal Information:**

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

\_\_\_\_\_

**Other Information:**

Do you attend Church? If so where? \_\_\_\_\_

How did you hear of our VBS? (Ex: flyer, friend, website, other . . . )

\_\_\_\_\_

May we contact you with information regarding F.G.B.C? \_\_\_\_\_