

SHIPWRECKED VBS

Sun. July 22 – Thurs. July 26
6:30 -8:30 at St. Paul's UCC

<p>2018 Vacation Bible School Registration Form</p> <p><i>St. Paul's UCC</i></p>

Name(s), age(s), last school grade completed: _____

Parent(s)/Guardian(s) _____

Street address: _____

City: _____ State: _____ ZIP: _____

Phone: _____ Cell phone: _____

Emergency contact (name and number): _____

Allergies or other medical conditions: _____

Home church: _____ Email address: _____

Name of a special friend that your child(ren) might like to be with: _____

Please check below.

I give permission for photographs of the individuals on this form to be used on VBS materials/website.

I do not give permission for these photographs to be used.



Parent signature: _____

**PLEASE PLACE COMPLETED REGISTRATION FORM IN EITHER CHURCH'S VBS BOX OR MAIL TO:
St. Paul's UCC, Attn: VBS Coordinator, 2173 Stoverstown Rd, Spring Grove, PA 17362**