

Children's Registration Form

St. Paul's Episcopal Church

2015 Vacation Bible School

June 1st – 4th

9am – 12 noon

Camp Discovery

Name _____ Birthdate _____

School Grade just Completed _____

Address _____

City _____ State _____ Zip _____

Home Phone _____

Cell Phone _____

Email _____

Parent(s) Name(s) _____

Parent(s) work phone _____

In case of emergency, contact _____

Phone _____

Relationship to Child _____

Known Allergies or other medical conditions _____

In the event that group preferences can be accommodated, name of friend you would like in your VBS small group _____

Church family attends _____