

Point Pleasant Presbyterian Church Vacation Bible School Family Registration Form

August 3-7, 2015 (6pm-8 pm)
Please print legibly

| Name (s) and Age(s): | |
|---|--------------|
| | years old |
| | years old |
| | |
| Street Address | |
| Home Phone Cell Phone_ | |
| Mother's Name Father's Name | |
| Home E-mail address | |
| Number of family members coming to Naz | zareth: |
| Will parents be helping in other areas? Where? | |
| In case of emergency, contact: | |
| Allergies or other medical conditions: | |
| Home church: | |
| Name of special friend you child might like | e to be with |

PUBLICITY RELEASE

| witho | ionally we photograph children and use the photosout identifying children by name, in PPPC publications our website. Please indicate below: | |
|------------------------------------|---|--|
| | Yes You may use photographs of my child(ren) in publications or on the website. | |
| | No Please do not use photographs of my child(ren). | |
| Signature of Parent/Guardian Date | | |
| - | uestion please call the Church Office 732-899-0587 or Christina Parrott christinaparrott57@yahoo.com | |
| Place | in offering plate or return to: Point Pleasant Presbyterian Church, 701 Forman Ave., Point Pleasant Beach, NJ 08742 | |