



VBS Registration

Parent Information

Name _____

Email _____

Address _____ City _____

State _____ ZIP Code _____ Contact Phone 1 _____

Contact Phone 2 _____ Emergency Contact Name _____

Emergency Contact Relationship _____ Emergency Contact Phone _____

Alternate Pickup Name _____ Alternate Pickup Phone _____

Child Information

(Due to staffing constraints children who are not 4 years old on or before July 9, 2018 will be placed in the nursery. In order for your child to be in the nursery YOU or your child's caregiver MUST be participating in VBS as a volunteer.)

Name _____

Gender _____ Date Of Birth _____ Grade Entering _____

Allergies _____

Medical Concerns _____

Comments _____

Does your child have a friend he/she would like to be placed with?

If Your Child Is In Pre-School Is He/She Completely Potty Trained? _____

If Your Child Is In Pre-School Is He/She Able To Sit Still For 15 Minutes Or Longer? _____

Do You Have Any Additional Comments Or Information You Would Like For The VBS Staff To Know?

