



You can register online at **LCN.org**.

Registration Form — Register online at LCN.org Leavenworth Church of the Nazarene VACATION BIBLE SCHOOL

Monday, July 16 through Friday, July 20 • 10:30 am-1:30 pm For children 4 years old - entering 6th grade Lunch will be provided to all participants!

Child's Name	Gender	Age	Grade Entering	Birth Date	Special Concerns*
1.	M/F				
2.	M/F				
3.	M/F				

Please include information regarding additional children on the back of this form.

*Special Concerns:						
Parents' Names:						
Parents' Home Phone:		Family Email Address:				
Father's Mobile Phone:		Mother's Mobile Phone:				
Street Address:		City:				
State:	Zip Code:	Home Church:				
Emergency contact person ot	her than parent:					
Home Phone:	N	Mobile Phone:				
TWO RELEASE STATEM	IENTS (circle one for each sta	atement and sign):				
designated leaders from a	ll liability for damage, illness o	orth Church of the Nazarene Vacation Bible School (VBS) and or injury. In case of emergency involving injury or illness, I give and its representatives to order medical treatment.				
YES / NO I grant permission to Leavenworth Church of the Nazarene Vacation Bible School (VBS) to use my child's						

Return this completed form to Leavenworth Church of the Nazarene, 111 Ski Hill Dr., Leavenworth, WA 98826.

photograph, but not name, on materials produced by Leavenworth Church of the Nazarene VBS.