Murray Church of Christ

Vacation Bible School



CHILD REGISTRATION FORM

CHILD FIRST NAME	CHILD LAST NAME		
CHILD ADDRESS			
Street	City State Zip		
GRADE ENTERING THIS FALL (circle answer)	GENDER (circle answer)		
Preschool 3 rd grade 7 th grade Kindergarten 4 th grade 8 th grade	Male Female		
1 st grade 5 th grade 2 nd grade 6 th grade	WILL YOUR CHILD BE RIDING		
CHILD DATE OF BIRTH	THE CHURCH BUS FROM OSCEOLA?		
	YES NO		
T-SHIRT SIZE (circle answer)	T-SHIRT COLOR (circle answer)		
2T Youth X-Small Adult Small 3T Youth Small Adult Medium 4T Youth Medium Adult Large Youth X-Large Adult XX-Large	BLUE CORAL YELLOW ORANGE		
ALLERGIES FOR YOUR CHILD	MEDICAL CONCERNS FOR YOUR CHILI		
PARENT FIRST NAME	PARENT LAST NAME		

(please.....TURN OVER... more to complete on other side)

Street			City	State	Zip
PARENT EMAIL ADDRESS		S	PARENT	' PHONE NU	MBER
EMERGI Name	ENCY CONTA	CT INFORN			annot be reached)
DO YOU HA\	VE A CHURCH HOM	E? IF	YES, WHERE	IS YOUR CHU	RCH HOME?
YES	S NO				
	DU LIKE INFORMA	ATION ABOUT	ATTENDING	CHURCH AT	MURRAY CHURCH O
CHRIST? YES	NO				
COMME	NTS / SUGGE	STIONS / C	ONCERNS		