



JULY 13-17, 2009 9:00A-12 NOON

Vacation Bible School Registration/Information Form 2009

Payment of \$15 made out to St. John's VBS must be **included** with this completed form. Make sure that **both sides** are completed.

Please use **ONE** form for **EACH** child. Thank you!

Child's name _____ Age _____

Child's address _____

City _____ State _____ Zip _____

Child's Grade in the Fall 2009**** _____

Mother's Name _____

Mother's Home Phone _____

Work Phone _____

Cell Phone _____

Other _____

Father's Name _____

Father's Home Phone _____

Work Phone _____

Cell Phone _____

Other _____

Whom does the child live with? _____

Does your child have any food allergies? _____

If yes, please list

Anything else we should know about your child?

Send through school via "VBS" or take to Parish Office.

Office use only

Paid yes no cash _____ check# _____ Date _____