

# VBS Registration Form

**New Covenant Baptist Church**  
**3196 F Road, Grand Junction**  
**970-434-7240**

**Child's Name** \_\_\_\_\_

**Parent/Guardian Name** \_\_\_\_\_

**Address** \_\_\_\_\_ **City** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Mailing Address** (if different) \_\_\_\_\_

**E-mail** \_\_\_\_\_

**Phone Numbers** (where we may reach you if needed)

Home \_\_\_\_\_ Work \_\_\_\_\_

Cell \_\_\_\_\_

## **Child's Age Information**

Birth date \_\_\_\_\_ Last grade completed in school \_\_\_\_\_

**Medical Information:** Medical or other information we need to know. (Please include any food allergies.)

\_\_\_\_\_  
\_\_\_\_\_

## **Emergency Contact** (if other than above)

Name \_\_\_\_\_ Phone number \_\_\_\_\_

## **Dismissal Information**

Who may pick up your child at the end of each VBS day?

\_\_\_\_\_

## **Other Information**

Do you attend Sunday School? If so where?

\_\_\_\_\_

How did you hear about our Vacation Bible School?

\_\_\_\_\_

May we have permission to photograph your child? Yes  No

May we have permission to use your child's photograph for the purpose of promotion? Yes  No

