

Vacation Bible School Registration

(For 3 years through children who completed 5th Grade this year)

Mon., June 10 – Fri., June 14 2018 8:30am to 12:30pm Closing Program 7pm Friday June 14th VBS Sunday 8:30am & 10:45am

Child's Name (Last, First)			
Address	City	State	Zip
E-Mail address	Grade co	mpleted	DOB
Allergies/ other medical		Epi po	en required? Yes No
Names of Siblings also enrolled			
Parent/ Guardian Name			
by cheant United Methodist Church. I also authorize emergency medical treatment should it become necessary. Idditionally, I give permission for my child to be photographed and for the church to use the photographs. Scheck # arent's or Guardian's Signature Date Date			
Daytime phone #'s: Home	Work	Cell	
Names of persons authorized to pi	ick up your child.**WE	WILL RELEAS	SE YOUR CHILDREN ONLY
NAMES ON THIS LIST (Must sl	how ID at time of pick u	ıp).**	
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		ncy medical treatn	nent should it become necessary.
X	 ure Date	\$	cneck #
S			\
son in the office: 767-8544.			. 0
	CUMC, with VBS on n	nemo line, and l	mail with completed registrat
to: Covenant United Methodist Ch	nurch	SKY C	ad'e wild
Port Orange, FL 32129	1	4	bout you!
the 3 year old & 4 year old cl full, we will not be able to add child now!	e is limited to a max lasses). Registration d more students. Doi	imum of 20 pe is first come, f n't miss out on	r grade level (15 children f irst served. Once a class is all the fun. Register you
Tee Shirt Information:			
Child's Name		Grade Comp	leted
Please check one: Youth XS (Size	2-4) Youth S (Size	e 6-8) Youth M	M (Size 10-12)
Youth L (Size 14-16)	or Adult S M	I. XI	XXI. XXXI.