



**Vacation Bible School
July 19-23
9:00a.m.-12:00p.m.
All kids ages 4 through 5th grade
Registration Form**

Name _____ Birthday __ / __ / __ Age: __ Grade completed _____ t-shirt size _____

Name _____ Birthday __ / __ / __ Age: __ Grade completed _____ t-shirt size _____

Name _____ Birthday __ / __ / __ Age: __ Grade completed _____ t-shirt size _____

Parent/Guardian Name: _____

Address: _____ City: _____ State: _____ Zip code: _____

E-mail address: _____

Phone numbers: Home: _____ Cell: _____ Work: _____

Allergies/Medical Information/Other:

Emergency Contact:

Name: _____ Phone: _____

Fees: (check appropriate box)

\$10 per child (early registration by June 18) t-shirt included

\$20 per child (late registration after June 18)

Please provide a scholarship for my child/children to attend

Please enclose registration fee with this form in an envelope and return to the church office.

I release Christ United Methodist Church and the VBS leadership of all claims of possible damages arising from VBS activities.

_____ (signature)

Please return

(For office use only)*****

Date: _____ Paid: _____ x cash check # _____

Christ United Methodist Church 4530 A St. Lincoln NE 68510 402-489-2303