

Good Shepherd Vacation Bible School 2009 Registration Form

*\$15.00 per child OR \$40 for family of 3 or more.
(Scholarships are available; please indicate below whether you are requesting this assistance.)*

*** BUY YOUR MUSIC CD BEFORE VBS FOR ONLY \$5! ***

*Increase your payment by \$5 if you are interested.
It will be mailed to you or you can stop by and pick it up.*

1. Child's Name (*Last, First, MI*): _____
2. Child's age by May 1st, 2009: _____ 3. Grade just completed: _____
4. Parent's Name(s): _____
5. Address: (*Include Street, City & Zip Code*)

6. Phone Numbers – (*Include Area Codes*)
Home: _____ Work: _____ Cell: _____
7. Email address: _____
8. How did you hear about our program? _____
9. List any allergies your child may have (e.g., foods, bee stings, etc.). *Please be specific!*

10. Special comfort or care needs your child has of which we should be aware? *Please be specific!*

11. Child's first name as it should appear on name tag: _____
12. Local emergency contact information in case parents can't be reached from 9 a.m. - 12 p.m. on VBS days. Name: _____ Phone No.: _____
13. Who is authorized to pick up your child from Vacation Bible School? (*Full names please!*)

14. Does this child have siblings enrolled in this VBS? Yes No
15. IF YES to #14, please list full names & ages: _____
16. T-Shirt Size (*circle one*)
CHILD: 6-8 10-12 14-16
ADULT: S M L XL XXL
17. We request scholarship assistance. Yes No

I grant permission for my child to participate in *Good Shepherd Vacation Bible School 2009*, and release Good Shepherd United Methodist Church from any liability in case of accident or emergency.

Signature of Parent/Legal Guardian: _____ Date: _____

Contact me; I'd like to volunteer! Contact me; I'd like to donate snack and/or craft materials!

PLEASE RETURN AS SOON AS POSSIBLE TO:

Good Shepherd United Methodist Church, 14999 Birchdale Ave., Woodbridge, VA 22193