



Registration Form
VBS 2017—Trinity UMC
August 14th-18th, 9am—12pm
Ages: 3 years (potty-trained)
to rising 6th graders

Child's name: _____ Child's gender: _____
Child's age: _____ Date of birth: _____ Last school grade completed: _____
Name of parent(s): _____
Street address: _____
City: _____ State: _____ Zip: _____
Home telephone: (_____) _____
Parent/caregiver's cellphone: (_____) _____
Home email address: _____
Home church: _____



Allergies or other medical conditions: _____

In case of emergency, contact _____
Phone: _____
Relationship to child: _____

**JESUS
LOVES
YOU!**

**BUILT FOR
A PURPOSE**