

# St. Paul's Catholic Church VBS Registration

**June 11 - 15; 9am - 12:00pm**

**Child must be 4 years old by June 1, 2018**

**Payment Due at Time of Registration- must have payment to save your spot**

Child's Name :(First) \_\_\_\_\_ Last: \_\_\_\_\_ Gender: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Current Grade: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Allergies or other medical conditions (including food): \_\_\_\_\_

**T-Shirt Size: (mark one):** Child's X-Small (2-4) \_\_\_ Child's Small (6-8) \_\_\_\_\_ Child's Medium (10-12) \_\_\_\_\_  
Child's Large (14-16) \_\_\_\_\_ Adult Small: \_\_\_\_\_ Adult Medium \_\_\_\_\_

**SAVE PAPER! REGISTER ADDITIONAL CHILDREN ON REVERSE SIDE.**

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Mother's Name (First and Last): \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Father's Name (First and Last): \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Contact's Email address \_\_\_\_\_

Emergency contact (other than parent)

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

For carpool purposes, other than parent, who has permission to pick up child?

**Must have ID and be over 16 years old**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**Media /Photo Consent:**

As a parent/guardian of the child(ren) listed above, I give consent for the use of pictures in media promoting and recognizing the events of St Paul's VBS. This media may include parish website, flyer, newsletters, and PowerPoint presentations. Children will not be identified by name.

Parent's Signature: \_\_\_\_\_ Date \_\_\_\_\_

**Registration Fees for VBS**

(fees cover VBS materials, tshirt, daily snack, keepsake photo, and 1 music cd per family)

\$45- 1 Child

\$40 -each additional child

**TOTAL DUE:** \_\_\_\_\_

**Office Use Only**

Total Amt. Pd. \_\_\_\_\_

Cash \_\_\_\_\_

Check # \_\_\_\_\_

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