

SonTreasure Island VBS 2017

REGISTRATION FORM

Last name _____

Name & grade (going into)

Shirt size (XS to L)

Child 1. _____

Child 2. _____

Child 3. _____

Street address _____

City _____ State _____ Zip _____

Home phone (_____) _____

Cell phone (_____) _____

Email _____

Parent name(s) _____

In case of emergency, contact _____

Who may pick up my child/ren (besides parents) _____

Allergies or other medical conditions

1. _____ 2. _____ 3. _____

Name of home church, if any _____

I hereby GRANT DO NOT GRANT (please choose one) permission for Alpine Bible Church to use pictures of my child/ren _____ (name of child) for display in Alpine Bible Church service or on their Facebook page (no names will be disclosed).

Parent/legal guardian

(print name)

Parent/legal guardian

(signature)