



Child's **Name:** _____

Last **Grade** Completed in School _____ **Age** as of VBS start: _____

Parent or Guardian: _____

Emergency Contact Number(s): _____

We will have a recess period as well as provide a snack each day for your child so please be sure to let us know about any **food allergies** or **special needs:** _____

Children must be registered by Thursday, June 12th to attend.

Please fill out a **separate form** for **each child** that will be attending VBS. You may also contact the VBS Director, Renee Stroman, or the Church Office at 361-645-3330 for more information.

- My child **MAY** appear in photos for the church's Facebook page or newsletter.
- My child **MAY NOT** appear in photos for the church's Facebook page or newsletter.