

Calvary Chapel Santee

Vacation Bible School

Mon. - Fri., July 28th - August 1st, 2014

6:30-8:30 p.m. *check in starts at 6:20pm*



4 yrs. – 6th grade: Registration Form

one form per child; return completed form before or day of VBS to grant your child permission to participate in this year's VBS ☺

(Please print clearly)

Child's Name _____ Age _____ Birthdate _____ Grade in Sept _____

Street Address _____ City _____ State _____ Zip _____

Father's Name _____ Home phone (____) _____ Cell (____) _____

Mother's Name _____ Home phone (____) _____ Cell (____) _____

Family Email (optional) _____

In case of an emergency, we will contact parents first.
If we cannot reach a parent, please list two other people as emergency contacts.

Emergency Contact _____ Relationship _____

Home phone _____ Cell phone _____

Emergency Contact _____ Relationship _____

Home phone _____ Cell phone _____

Please list food allergies, medical conditions, special needs, or information important to your child's care and safety:

I **grant** **do not grant** permission for Calvary Chapel Santee to use pictures of my child on their website for informational or promotional purposes.
(please chose one)

Parent/Legal Guardian (Signature) _____

Parent/Legal Guardian (Print Name) _____ Date _____