



Vacation Bible School Registration Form

June 11-15, 2018
9:00 - 11:30 am
Age 3 to 4th Grade
(One Form Per Child)



6111 S. Shelby Street
Indianapolis, IN 46227

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: (____) _____ Home e-mail address: _____

Parent/caregiver's cell phone: (____): _____

Shirt Size: _____ Home church: _____

Crew number or name (for church use only): _____

Allergies or other medical conditions: _____

In case of emergency, contact: _____

Phone: _____

Relationship to child: _____

Please return completed forms to the church office or place in Paula Streib's mailbox in the narthex.

Deadline for registration is Sunday, May 20th.