

*MIRACULOUS MISSION VBS*

**Trinity Lutheran Church VBS REGISTRATION      June 10 - 14 2019    8:30a.m. – 11:00a.m.**

(One form per child, please)

\*Student First Name: \_\_\_\_\_

\*Student Last Name: \_\_\_\_\_

Age: \_\_\_\_\_ Birth Date \_\_\_\_\_

Gender: Male    Female

Grade completed: \_\_\_\_\_

Allergies: \_\_\_\_\_

Medical Issues or Special Needs: \_\_\_\_\_

\*Parent Name: \_\_\_\_\_

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

\*City: \_\_\_\_\_

\*State: \_\_\_\_\_ Zip Code \_\_\_\_\_

\*Email: \_\_\_\_\_

\*Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Emergency Phone: \_\_\_\_\_

People who are allowed to pick up my child \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Home Church \_\_\_\_\_

Permission to Attend: I give permission for my child (named above) to attend the Vacation Bible School (VBS) listed above. I understand that the information I give for this registration will only be used by the VBS hosting church.

Trinity Lutheran Church does not have a basement. In the event of severe weather, children will be moved to windowless restrooms and hallways. If you prefer to come and pick up your child, you are welcome to do so.

\_\_\_\_\_  
**Parent Signature**

\_\_\_\_\_  
**Date**

**REGISTRATION FORMS DUE BY MAY 29, 2019** Please return to:

Sharon Gerth

315 E. 8<sup>th</sup> St.

El Paso, IL 61738

309-287-2085