

2018 VACATION BIBLE SCHOOL REGISTRATION FORM

(One form per child, please)

St. Peter's Lutheran Church
43W301 Plank Road, Hampshire, IL 60140
Phone 847 464-5721
Fax 847 608-8438

"SHIPWRECKED...JESUS RESCUES/GOD SAVES"

JUNE 25-28, 2018

9:00 to 11:45 a.m. for Ages 4 through 6th grade

Please mail or fax your registration form by June 18th if possible

Student First and Last Name _____

Date of Birth _____ Age _____ Gender _____

Grade entering _____

Home Church _____

Allergies _____

Medical issues or special needs _____

Parent(s) _____

Address _____

City _____ State _____ Zip Code _____

Email: _____

Home Phone Number _____

Cell Phone Number _____

Emergency Contact _____ Phone # _____

Emergency contact's relationship with child _____

Registration fee is \$10.00 per child. Please make checks payable to St. Peter's

Medical Release: I give my permission for the VBS staff to administer basic first aid to my child (named above) in the event of an injury. I understand that the VBS staff will contact emergency services in the event of a significant injury and all expenses for such emergency services will be paid by me.

Parent Signature

**** To download additional forms, please visit our web site at www.stpetersnorthplato.org**