

# HELPERS ONLY

**Must have completed 6<sup>th</sup> grade**

## 2019 VACATION BIBLE SCHOOL REGISTRATION FORM

*(One form per person)*

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

**"ROAR! LIFE IS WILD \* GOD IS GOOD"**  
**June 24-27, 2019**  
**9:00 to 11:45 a.m.**

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: (Please print clearly) \_\_\_\_\_  
Home Phone Number \_\_\_\_\_  
Cell Phone Number \_\_\_\_\_  
Emergency Contact \_\_\_\_\_ Phone # \_\_\_\_\_  
Emergency contact's relationship with you \_\_\_\_\_

**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**

**\*\* No registration fee required for helpers**

**\*\* Please mail your registration form as soon as possible; or e-mail to [office@stpetersnorthplato.org](mailto:office@stpetersnorthplato.org)**

**\*\*What grade level would you like to work with? \_\_\_\_\_**