

Vacation Bible School 2019

Registration Form Ages 3 – completed 5th grade

Ages 3 – completed 5th grade Sunday 7/21- Thursday 7/24 6:00 -8:00pm – Dinner will be provided each night

Participant #1:	
Child's Name Age	DOB Male/Female (circle one)
Address	Last Grade Completed in School
Allergies or Medical Concerns	
Participant #2:	
Child's Name Age	DOB Male/Female (circle one)
Address	Last Grade Completed in School
Allergies or Medical Concerns	
Participant #3:	
Child's Name Age	DOB Male/Female (circle one)
Address	Last Grade Completed in School
Allergies or Medical Concerns	
Parent/Guardian Information: Mother's Name:	I would like to volunteer to help with VBS YES/NO (circle one)
Home Phone: ()	Cell Phone: ()
Father's Name:	I would like to volunteer to help with VBS YES/NO (circle one
Home Phone: ()	Cell Phone: ()
Family Email address	
Emergency Contacts:	
Name	Phone #
Name	Phone #
Please list names of individuals who may pick your	child up from VBS

Please mail to: Friedland Moravian Church VBS ~ 2750 Friedland Moravian Church Road ~ Winston-Salem, NC 27107

Or Union Cross Moravian Church ~ 4295 High Point Road~ Winston-Salem, NC 27107

Or email to: office@friedlandmoravian.org or ucmc@Unioncrossmoravian.org