



Faith Lutheran Church

Vacation Bible School

June 11 - 15, 2018

9 a.m. - Noon

**FAMILY REGISTRATION FORM**

(4 years through completed 5th grade)

**REGISTER EARLY!**

**RATES WILL INCREASE AFTER MAY 15, 2018**

**On or before May 15 cost is: \$25/child, Max of \$60/family**

**After May 15 cost is: \$30/child, Max of \$70/family**

## Family Information

Last Name: \_\_\_\_\_ Parents' or Guardians' Name(s): \_\_\_\_\_ \ \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Preferred Email: \_\_\_\_\_

Mom's Cell: \_\_\_\_\_ Dad's Cell: \_\_\_\_\_

Yes, we have a church home.

Church Name: \_\_\_\_\_

No, we do not have a church home.

We would like more information about Faith.

## Disclaimer (Photo and Video Release)

I hereby grant Faith Lutheran Church permission to copyright and use images and videos taken at VBS of any minor(s) designated on the back side of this form in any manner or form for any purpose lawful at any time. I waive any right that I may have to inspect or approve the finished product or written copy, that may be used in conjunction therewith, or the use to which it may be applied. I understand that there will be no compensation for participating in photo/video shoot.

I DO NOT grant permission as stated above.

Parent or Guardian Signature: \_\_\_\_\_

**List ALL Children to be Registered on Reverse Side**

## Faith Contact Information

Dawn Novak | 314.375.1126 | dawn.novak@faithstl.org

Find more information about VBS at FAITHstl.org



# Participant Information

Please list ALL CHILDREN to be registered:

Eligibility: Ages 4 years old by June 11, 2018 through completed 5th grade

**T-shirt sizes: Youth XS, Youth S, Youth M, Youth L, Adult S, Adult M, Adult L**

Name	DOB (mm/dd/yy)	Gender (M / F)	Grade Completed	School	T-Shirt Size	Name of Child's Friend*

**\* We will make every attempt to place your child(ren) in the same small group as their friend.**

## Food Allergies or Special Needs:

Child's Name: \_\_\_\_\_ Allergies/Special Needs: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Allergies/Special Needs: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Allergies/Special Needs: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Allergies/Special Needs: \_\_\_\_\_