Pemberton First Baptist VBS 2018 Registration Form – SonWest Roundup





Name		_ Age	_ Grade	Birthday	M	_ F
Name		Age	Grade	Birthday	M_	_ F
Name		Age	Grade	Birthday	M_	_ F
Name		Age	_ Grade_	Birthday	M_	_ F
Parents'/Guardian	s' Names:					
Address:						
	Street			City, State & Zip		
Contact Phone# _	(Please specify Home, Cell, Work, Etc.	Alternat	e Phone #: _	(Please specify Home, C	Cell, Work,	Etc.)
Email Address: _						
In Case of Emerge	ency Contact Person/Contact Phone	e #:				
Alternate In Case	of Emergency Contact Person/Con	tact Phor	ne#:			
_	– (allergies, medications, medical c					
Does your child ha	ave any special needs? ☐ Yes ☐	No				
	For safety, no children will be perr p children in their designated classr		leave the bui	lding unattended. Yo	ou must er	nter the
I, the undersigned VBS.	parent/guardian, do hereby grant p	ermissio	n for my son/	daughter, named abo	ve, to atte	nd
Signature			Da	te		
be used in any pre	nay not be used for future VBS pro- esentation or publication. Mark you ed on any of Pemberton First Baptis	ır prefere	ence below w	hether or not you pref		