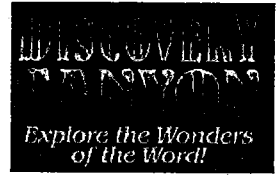


**VBS Registration – 2009**  
**Preschool/Kindergarten**  
July 6-10 9:00 am – Noon



**Children must be at least 3 ½ and toilet-trained. Thank You.**  
**Children who just completed Kindergarten should register for this week.**

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

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

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

Home Phone: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Age: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Daytime email address: \_\_\_\_\_

Registration Fee: \$35

Cash     Check #: \_\_\_\_\_

I need child care during the following times (\$5 per day):

8:00 – 9:00 am     Noon – 4:00.

Please note any allergies or other medical conditions below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

***Please return this form to the Church Office July 1<sup>st</sup>.***