



# BVC VBS – SHIPWRECKED

July 9<sup>th</sup>-13<sup>th</sup> 9am-Noon

## K-5<sup>th</sup> Grade Registration Form

#1 Child's Name: \_\_\_\_\_ Gender: Male / Female

Allergies: \_\_\_\_\_ DOB: / / Grade Entering: \_\_\_\_\_

Kid's T-Shirt Size: S M L XL

#2 Child's Name: \_\_\_\_\_ Gender: Male / Female

Allergies: \_\_\_\_\_ DOB: / / Grade Entering: \_\_\_\_\_

Kid's T-Shirt Size: S M L XL

#3 Child's Name: \_\_\_\_\_ Gender: Male / Female

Allergies: \_\_\_\_\_ DOB: / / Grade Entering: \_\_\_\_\_

Kid's T-Shirt Size: S M L XL

#4 Child's Name: \_\_\_\_\_ Gender: Male / Female

Allergies: \_\_\_\_\_ DOB: / / Grade Entering: \_\_\_\_\_

Kid's T-Shirt Size: S M L XL

PARENT/GUARDIAN Name: \_\_\_\_\_ Phone \_\_\_\_\_

PARENT/GUARDIAN Name: \_\_\_\_\_ Phone \_\_\_\_\_

(\$10 suggested donation per child)

Other medical conditions/concerns: \_\_\_\_\_



In case of emergency, contact: \_\_\_\_\_

Phone: \_\_\_\_\_

Relationship to child: \_\_\_\_\_