



Central  
Presbyterian  
Church

Office Use  
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# VBS 2011 Registration

July 11<sup>th</sup>-15<sup>th</sup>, 9:00-12:00

VBS is offered to children age 4 through children entering 6<sup>th</sup> grade. Please complete one form per volunteer and place in the VBS Basket at the Welcome Center, in the Church office, or in the mail. If you would like to volunteer for VBS please fill out a Volunteer Form. Thank you!

## STUDENT INFORMATION

Child's Name: \_\_\_\_\_ Parent/Guardian: \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_  
\_\_\_\_\_ Grade Entering in Fall: Pre School Pre-K K 1<sup>st</sup> 2<sup>nd</sup> 3<sup>rd</sup> 4<sup>th</sup> 5<sup>th</sup> 6<sup>th</sup>

Email (confirmation and reminders will be sent via email) \_\_\_\_\_

Name of one friend you would like to be placed with: \_\_\_\_\_ (Efforts will be made to accommodate this, but not guaranteed. Children must be either in the same age group or entering the same grade.)

T-shirt size (circle one) Youth: S M L Adult: S M L

Home Church: \_\_\_\_\_

## EMERGENCY INFORMATION

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Alt. Phone \_\_\_\_\_

People authorized to pick child up from VBS: \_\_\_\_\_

Allergies/Medical Condition: \_\_\_\_\_

Instructions for treatment: \_\_\_\_\_

(Food Allergies: Please include specific information. Please feel free to use the back of the form. You will be contacted by the Snacks leader prior to VBS.)



### Photo Permission:

\_\_\_\_\_ I do give permission for my child's photograph to be taken and used for VBS purposes.

\_\_\_\_\_ I DO NOT give permission for my child's photograph to be taken.

\_\_\_\_\_ (Signature or Parent Signature)

If you have any questions please contact:  
Wendy Walsh, Christian Education Director 610-269-1576 or wendy@cpdowningtwn.org

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