



Grace Lutheran Church VBS 2008 Registration Form

July 27-31 8:45 - 11:30 am

(Registration begins at 8:45; opening begins at 9:00. One form per child, please.)

Child's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Email Address: _____

Parent's/Guardian's Name: _____

Emergency Contact Number: _____

Child's Age: _____ Grade Completed: _____

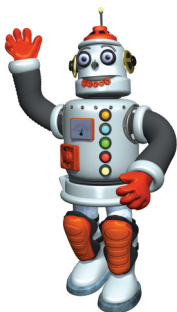
Siblings attending VBS (names and ages): _____

Member of Which Church: _____

Who is Authorized to Pick-Up Child: _____

Allergies or Special Needs: _____

Please complete this form, the photo permission form, and the medical release form and return them to the church office. If you have any questions, please contact Grace Lutheran Church at 372-4859.



*For we are his workmanship, created
in Christ Jesus for good works,
which God prepared beforehand,
that we should walk in them.
Ephesians 2:10*

