

SOUTHWOOD BAPTIST CHURCH

VACATION BIBLE SCHOOL

JUNE 26 – 30, 2017

9:00 – 11:45AM

AGES 4 – GRADE 5



Register each child on the church website, [www.southwoodministries.org/cave-quest-vbs-2016-registration-form](http://www.southwoodministries.org/cave-quest-vbs-2016-registration-form) , or by completing the form at the bottom of the page and returning it to the church office. For questions concerning registration contact Connie Ramer, VBS Registrar, at 856-468-1595 or mommomramer@aol.com. Children are grouped by crews with pre-school and kindergarten together, and grades 1-5 together. Pre-registration assures that your child can be placed with **one** friend listed on the form. No switches can be made on opening morning. Registration online closes on Friday, June 23rd.

Food served as a daily snack will be posted each day. If your child has a food allergy please provide your child with his or her own snack.

On occasion children are photographed during their activities. Photos are to be used in an in-house power point presentation. Registration implies consent for photo.

Detach and keep top portion for your information.

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Child’s name (Last, First)

Child’s age (as of June 20) \_\_\_\_\_ Last school grade completed \_\_\_\_ One Friend’s Name \_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Father’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Daytime Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Daytime Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother’s cell #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Father’s cell # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preferred email address for daily VBS updates \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Church \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Inhouse Crew No. (church use)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In case of emergency contact \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (other than Parents)

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

Allergies and other medical condition(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_