

# Participant Registration Form

## From Above - Vacation Bible School

### Child Information:

Age: \_\_\_\_\_ Grade Completed: \_\_\_\_\_

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Nickname \_\_\_\_\_  
Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone Number \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Is this child baptized? **Yes No** If yes, date of Baptism \_\_\_\_\_

### Parent/Guardian Information:

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Email Address \_\_\_\_\_  
Street Address (if different from above) \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_ Daytime Phone \_\_\_\_\_  
Home Church (Name, City) \_\_\_\_\_ Pastor's Name \_\_\_\_\_  
Emergency Contact \_\_\_\_\_ Phone Number \_\_\_\_\_ Relationship to Child \_\_\_\_\_  
Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

***Unless otherwise instructed in writing, only the child's parent/guardian (listed above) may pick up this child after Vacation Bible School each day.***

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