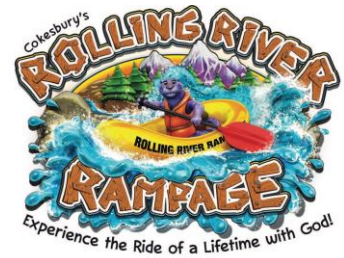


Seaford United Methodist Church  
Vacation Bible School Registration Form  
2018



Child's Name \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

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

E-mail Address \_\_\_\_\_

Contact Numbers Home \_\_\_\_\_ Cell \_\_\_\_\_  
Work \_\_\_\_\_

Date of birth \_\_\_\_\_ Age \_\_\_\_\_

Last school grade completed \_\_\_\_\_

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

Special Needs/Allergies/Medical Information/Other:  
\_\_\_\_\_

Emergency Contacts

Name \_\_\_\_\_

Phone \_\_\_\_\_

Name \_\_\_\_\_

Phone \_\_\_\_\_

Dismissal Information: Name(s) of person(s) who may pick up this child from VBS  
\_\_\_\_\_  
\_\_\_\_\_

Registration Fees

\$35 for the 1<sup>st</sup> child in a family; \$30 for the 2<sup>nd</sup> child in the same family;

\$25 each for the 3<sup>rd</sup> or more children in the same family.

Checks made payable to: United Methodist Church of Seaford