

**Hope Lutheran Church
Vacation Bible School**

June 22 - 26, 2009

9 AM - NOON

3-years-old through 4th grade



REGISTRATION FORM

Family Name _____ E-mail address _____

Street address _____

City _____ State _____ Zip _____

Home phone _____ Emergency phone (cell) _____

List all children attending VBS:

First Name _____ Age _____ Grade Completed _____

First Name _____ Age _____ Grade Completed _____

First Name _____ Age _____ Grade Completed _____

List any allergies or other medical conditions _____

The success of our VBS depends on our great volunteers! Parents and guardians, check here to be a part (big or small) of Hope's 2009 Vacation Bible School:

_____ *Yes! I'd like to help!!*

Please return this form with \$15 per child (maximum \$50 per family) to the church office by May 15, 2009.

Photo Consent: Photos and video of children participating in VBS may be used in brochures, flyers, newsletters, Hope's website or other media. If you do not wish your child's photos/video to be included, please notify the church office in writing.