VBS Registration Form

June 7-11, 2009 6:00-8:30

Return this form to:
Chestnut Grove UMC
450 Chestnut Grove Rd, Dillsburg, PA 17019

Turn in registration form by June 1st to be entered in a drawing for a great prize!!

Parent/Guardian Name _____

Address _____

Phone Numbers:

Home _____ work _____ cell _____

email: _____

EMERGENCY CONTACT

Name _____ Phone Number _____

Name _____ Phone Number _____

Who may pick up your child at the end of VBS each night? _____

_____

Do you have a church home? If yes, where? _____

CHILD/CHILDREN INFORMATION

Name (first, last)	Birth Date: mm/dd/yy	Last Grade	Allergies or Medical condition	Name of friend to be grouped with?