



Registration Form

Child's Name _____

Parent/Guardian Name _____

Address _____

E-mail Address _____

Phone Numbers Home _____ Cell _____ Work _____

Age Information
Date of birth _____ Age _____

Last school grade completed _____

Home Church _____

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

Other Information (church use only)

Camper Group _____

Are parents helping with CAMP E.D.G.E. VBS? _____ If yes, where? _____

**The LORD is my strength
and my might. Psalm 118:14a**