



Registration Form

First United Methodist Church
Vacation Bible School
July 14-18, 5:30pm-8:30pm

(age 3-exiting 6th gr)

426 St. Paul Gonzales, Texas 78629
Contact Willa, 672-8521, wkeck@gvec.net

Child's name: _____

Child's age: _____ Date of birth: _____ Last school grade completed: _____

Name of parent(s): _____

Street address: _____

City: _____ State: _____ ZIP: _____

Home telephone: (_____) _____

Parent/caregiver's cell phone: _____

Home e-mail address: _____

In case of emergency, contact: _____

Relationship to child: _____

Allergies or other medical conditions: _____

Home church: _____

Crew number or name (for church use only): _____

T-shirt Size (\$5 each) **Youth:** XS (2-4) YS (6-8) YM (10-12) YL (14-16) YXL (18-20)

(circle size) **Adult:** S M L XL 2XL

Paid: Cash _____ Check # _____

Parent Volunteer: _____

Permission to release photos and videos for publicity purposes: _____ Yes _____ N