



# Registration Form

## First United Methodist Church Vacation Bible School July 13-17, 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