## First Lutheran Church Vacation Bible School Preschool - Kindergarten Registration Form

July JU - August 2, 2010					
Parent/Guardian 1:	Work Phone:	Cell Phone:			
Parent/Guardian 2:	Work Phone:	Cell Phone:			
Address:	City:	Zip			
Home Phone:	Email address				

Church Membership: \_\_\_\_\_

How did you learn about VBS/Day Camp at First Lutheran? \_\_\_\_\_

Student 1	Birthdate:	Grade (in fall)	
Any Special needs we should be aware of? *		One Friend: **	
Student 2	Birthdate:	Grade (in fall)	
Any Special needs we should be aware of? *		One Friend: **	
Student 3	Birthdate:	Grade (in fall)	
Any Special needs we should be aware of? *		One Friend: **	

\*Such as food allergies, physical/mental challenges, learning disabilities, custody arrangements, etc.

\*\* If your child wants to be grouped with a friend, we will do our best to accommodate this request. The other child must be in the same grade and we can only accommodate one friend request per person.

Cost ***	VBS (3 year olds- Kindergarten)	\$30.00	9 AM - 12 PM	
*** Schol	arships Available (Dona	tions of financial s	upport are also accepted. Can you help	?)

**Registration + Payment Reserves Your Spot.** 

\_\_\_\_\_ (Parent/Guardian Initials) I give my permission to First Lutheran Church to use photographs of my child in its public displays or media releases. I understand these photographs will not be sold or used for commercial purposes.

If I cannot be reached, I give permission for VBS staff to call for medical assistance and/or transport my child to a local medical facility and seek treatment between the dates of July 31 - August 3, 2017.

Parent Guardian Signature \_\_\_\_\_

\_\_ Date: \_\_\_\_\_

First Lutheran Church Website: <u>www.flcbothell.org</u>

 10207 NE 183<sup>rd</sup> Street
 Bothell, WA
 98011

 Phone: 425-486-2314
 Fax: 425-489-4898
 Revised 5/10/2016