

**Bible School Registration Form**  
**The Lord is our Shepherd**  
**June 5th – 9th 9:00 – 12:00**

Children's Name \_\_\_\_\_

Parent's Name \_\_\_\_\_

Children's Ages \_\_\_\_\_ Rising Grades \_\_\_\_\_

Email address \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_

Work Number \_\_\_\_\_

Cell Number \_\_\_\_\_

I will be there to volunteer on the following day(s): *Please circle all that apply.*

Monday   Tuesday   Wednesday   Thursday   Friday

Allergies or other Special Medical Conditions \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Medical Waiver: I give my permission for my child to be driven to a doctor, to have necessary medicine or First Aid administered, or to be taken to the Emergency Room, if needed. I release The Episcopal Church of the Hoy Spirit, staff and volunteers from all liabilities.**

Parent signature \_\_\_\_\_

Date \_\_\_\_\_

**In case of emergency please contact:**

Name \_\_\_\_\_

Phone \_\_\_\_\_

*Parish Member fee is \$25.00 per child with a family maximum of \$75.00.*

*Non-Parish member fee is \$35.00 per child with a family maximum of \$100.00.*

*This fee is for all crafts and supplies as well as snacks each day.*

*Scholarship funds are available for any in need.*

**NO REGISTRATION DEADLINE**