

2019 VBS REGISTRATION FORM				
Family Name				
Address				
Phone #	Cell #		_Emergency#_	****
All children must be the age of 4 before June 15				
Child's Name	Grade in Sept.	Age	Gender	Allergies
Child's Name	Grade in Sept.	Age	Gender	Allergies
Child's Name	Grade in Sept.	Age	Gender	Allergies
VBS Helper Name	Gender	_ Age	_Grade in Sept.	[6 th grade and above]
Fee \$15.00 one child Total amount enclosed \$_		-		VBS Helper \$5.00/helper
Make sheek asymble to St Martin de Perres				

Make check payable to St Martin de Porres

For more information, contact the One registration form per family.

Christian Formation office at 586-264-7970 or formation@smdeporres.com