

**St. Bridget Catholic Church  
Vacation Bible School  
June 3 – 7, 2019  
Registration Form**

**Please PRINT clearly**

**Child's Name** \_\_\_\_\_ **Gender: MALE**                      **FEMALE**

**Age** \_\_\_\_\_ **Grade Level 2019 - 2020** **School Year** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_

**Parents/Guardians** \_\_\_\_\_

**Address** \_\_\_\_\_

**Phone** \_\_\_\_\_ **Emergency Contact (not parents)** \_\_\_\_\_

**Phone for Emergency Contact** \_\_\_\_\_ **Relationship** \_\_\_\_\_

**Name of Person Transporting Child if Not Parent** \_\_\_\_\_

**Phone of Person Transporting Child** \_\_\_\_\_ **Relationship** \_\_\_\_\_

**Known Allergies/Medical Concerns** \_\_\_\_\_

\_\_\_\_\_

**Snacks are included as part of the VBS program. Please list any known food allergies**

\_\_\_\_\_

Please note: Due to the nature of some games and activities, we request that participants wear tennis shoes. Flip flops will not be permitted.

\*\*\*\*\*

**For Office Use**

\*\*\*\*\*

**Fee Paid** \_\_\_\_\_ **Date** \_\_\_\_\_