



# Vacation Bible School Child Registration Form

**JULY 11-15 | 5-8 PM | Ages 5-12**

**\*Meal provided at 5 PM**

**Redeemer Covenant Church**

**7565 Morgan Road, Liverpool, NY, 13090 (315)-457-8887**



**If you wish to enroll your ages 5-12 child(ren) in our VBS program, please submit the form below. You can also register online at MyRedeemer.com. Please note, some of our activities involve water/getting wet. Have your child dress appropriately and let us know if this is an issue in the appropriate field below. Thank you!**

Parent/Guardian First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Email \_\_\_\_\_

Address \_\_\_\_\_

Primary Phone \_\_\_\_\_ Emergency Contact \_\_\_\_\_

Home church \_\_\_\_\_

Children's NAMES, AGES and T-SHIRT SIZES (S, M, L, XL)

\_\_\_\_\_ Age \_\_\_\_\_ Size \_\_\_\_\_      \_\_\_\_\_ Age \_\_\_\_\_ Size \_\_\_\_\_

\_\_\_\_\_ Age \_\_\_\_\_ Size \_\_\_\_\_      \_\_\_\_\_ Age \_\_\_\_\_ Size \_\_\_\_\_

\_\_\_\_\_ Age \_\_\_\_\_ Size \_\_\_\_\_      \_\_\_\_\_ Age \_\_\_\_\_ Size \_\_\_\_\_

Food allergies/sensitivities; medical or special needs/instructions?

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

Others permitted to pick up your child from VBS

Name \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_