

Vacation School of Religion 2008 Fee \$10-/child
June 23-27

Mom Name _____ Dad Name _____

Address _____ City _____

Phones: (H) _____ (W) _____ (C) _____

Children need to be 4 yrs to rising 5th graders.

Child 1

Child Name _____ Nick Name _____

Date of Birth _____ Age _____ Grade this fall _____

Allergies _____

Medical Conditions _____

Child 2

Child Name _____ Nick Name _____

Date of Birth _____ Age _____ Grade this fall _____

Allergies _____

Medical Conditions _____

Emergency Numbers if different from above _____

Pick up is at 12 noon. Who will be picking up your child?

If person not listed on this sheet is to pick up your child(ren), they MUST have a written note from parent.