



Nativity of the Blessed Virgin Mary
8550 Main Street, Williamsville NY 14221

2019 VACATION BIBLE SCHOOL REGISTRATION FORM

ONE FORM FOR EACH CHILD

PLEASE PRINT!

Child's first and last name

School Grade in Fall 2017 (K - 5)

Street address, town, zip code

Parent/Guardian first and last name

Home phone number

Emergency Contact / cell phone number

Shirt Size (Y-S,M,L; A- S,M,L,XL)

Emergency Information ~ In case of emergency it may be necessary to contact parents during a morning session. If parents cannot be reached, the Vacation Bible School personnel are authorized in the parents' name to contact the following persons and/or obtain emergency first aid service if necessary.

Date

Signature of Parent/Guardian

Physician name and address

Phone No.

Local relative/friend name and address

Phone No.

If there are any allergies or special medical needs we should know about, explain on the back

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TO BE COMPLETED BY BIBLE SCHOOL PERSONNEL ONLY

Date _____ Paid \$ _____ Ck. No. _____ Cash _____ Total No. Registered _____

Additional sibling(s) & grade(s) _____