



# St. Andrew Presbyterian Church

1390 Franklin Road, Yuba City 673-7353

## Vacation Bible School 2017 Registration Form

(JUNE 19th – JUNE 23<sup>TH</sup> MONDAY - FRIDAY)

JUNE 25<sup>TH</sup> VBS Celebration Sunday

9:00 AM – 12:00 PM (Ages 3 – 5<sup>th</sup> Grade)

Child's Name *(One Form Per Child)*: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Grade Entering: \_\_\_\_\_

Allergies or Medical Concerns? : \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone #: \_\_\_\_\_

Secondary Phone #: \_\_\_\_\_ Email Address: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

How did you hear about St. Andrew's VBS: \_\_\_\_\_

Home Church: \_\_\_\_\_

### Emergency / Medical Care Authorization

*I give my permission to the adult leaders of Vacation Bible School to perform and/or authorize any medical and/or emergency treatment deemed necessary to treat my child in the event of illness, injury or emergency. I understand that every effort will be made to reach me, but medical care will not be withheld if I cannot be reached.*

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Registration fee to be paid at time of registration  
(checks should be made payable to 'St. Andrew')

VBS Registration Fee = \$10.00 per child

Maximum \$30 per **immediate family**

Questions: Contact Carole @ [cgrisham@standrewpcusa.org](mailto:cgrisham@standrewpcusa.org) or 673-7363 Ext 13