

VBS 2025

July 28 to August 1, 2025

Ages 4-6 1st - 6th Grades 7th - 12th Grades		(Must be potty trained) (Lunch included) Opm (Meals included)
Cost is \$20 per cl	nild.	

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Parents Name	! *
First Name	Last Name
Email *	
example@example	e.com
Phone Numbe	r *
Please enter a valid	phone number.
Address *	
Street Address	
Street Address Line	2
City	State / Province

Postal / Zip Code

Emergency Contact Name *					
First Name	Last Name				
Emergency Co	Emergency Contact Phone Number *				
Please enter a valid	phone number.				
Child Number	1 *				
First Name	Last Name				
Grade Just Cor	mpleted 2024/2025 School Year *				
T-Shirt Size *					
List any allergi	es or other medical conditions we should know about:				
Child Number 2 *					
First Name	Last Name				
Grade Just Cor	mpleted 2024/2025 School Year *				
T-Shirt Size *					
List any allergi	es or other medical conditions we should know about:				

Child Number 3 *				
First Name	Last Name			
Grade Just Cor	mpleted 2024/2025 School Year *			
T-Shirt Size *				
List any allergion	es or other medical conditions we should know about:			
Child Number 4	1 *			
First Name	Last Name			
Grade Just Completed 2024/2025 School Year *				
T-Shirt Size *				

List any a	allergies or other medica	al conditions we should know a	bout:
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