



VBS REGISTRATION FOR 2010

July 26-30 9 - Noon

One registration form per child

GS Campers are invited to attend without cost

\$15 per child (payable to Good Shepherd)

NO FLIP FLOPS OR OPEN TOE SHOES ALLOWED

Child's Name: _____ Grade completed: _____

Birthdate (must be 4 by July 1) _____ Age: _____

Parent(s) name(s): _____

Phone where parent(s) can be reached during VBS: _____

Emergency contact person: _____

Emergency phone where contact person can be reached during VBS: _____

Family Doctor and phone number: _____

Food Allergies (list): _____ Medical Concerns (list): _____

People who may pick up your child (list name and phone number): _____

_____ GS Summer Camper? No Yes

EMAIL ADDRESS FOR CONFIRMATION: _____

Drop registration form, along with payment in collection basket or in Parish office to the attention of Sue Kroupa.



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