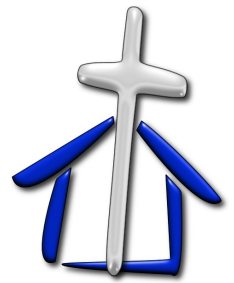


# First Baptist Church of North East

## VBS Registration Form



▶ This registration is downloadable online @ [www.fbcne.org](http://www.fbcne.org) .

▶ Fill out (**print please**) one (1) form per: child **and** bring with your child the 1st day of VBS.

**Child's Name:** \_\_\_\_\_ **Gender:** \_\_\_\_\_  
First Name Last Name

**Did child attend our VBS in 2014?** Yes / No / Don't Know (circle one)

**Does child attend our Jesus Loves Me Childcare Center?** Yes / No (circle one)

**Child's: Date of Birth** (month, day, year): \_\_\_\_\_ **Last Grade Completed:** \_\_\_\_\_

**Child's Allergies, Medical &/or Special Needs** (use back of form if needed): \_\_\_\_\_

**Parent/Guardian Name/s:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**PO BOX:** \_\_\_\_\_ **City, State, & Zip:** \_\_\_\_\_

**Parent/Guardian Phone #'s** C-Cell, H-Home (list in order of importance & indicate C or H) : \_\_\_\_\_

**Email:** \_\_\_\_\_

**Emergency Contact** (First/Last NAME & Phone #) **(1):** \_\_\_\_\_

**Emergency Contact** (First/Last NAME & Phone #) **(2):** \_\_\_\_\_

**\*Authorized Pickup** (First/Last NAME & Phone #) **(1):** \_\_\_\_\_

**\*Authorized Pickup** (First/Last NAME & Phone #) **(2):** \_\_\_\_\_

*(Use the back of this form to list additional "Emergency Contacts" &/or "Authorized Pick" Up Names)*

**Does child attend church?** Yes / No (circle one) **If so, where?** \_\_\_\_\_

**Is child attending as a guest of someone?** Yes / No (circle one) **Who?** \_\_\_\_\_

**May we have permission to photograph your child?** Yes / No (circle one)

**May we have permission to use your child's photograph in church publications?** Yes / No (circle one)

**Other comments or concerns** (use back of form if needed): \_\_\_\_\_

**Have you listed any information on the back of this registration?:** Yes / No (circle one)

**\*FOR YOUR CHILD'S SAFETY, STICKERS will be given to parent/s/guardian/s who plan to pick up a child—authorized "Pickup Person" WITHOUT the sticker MUST show a photo ID.**

| ATTENDANCE          | Van Rider<br>Y or N | MON | TUE | WED | THR | FRI |
|---------------------|---------------------|-----|-----|-----|-----|-----|
| for office use only |                     |     |     |     |     |     |