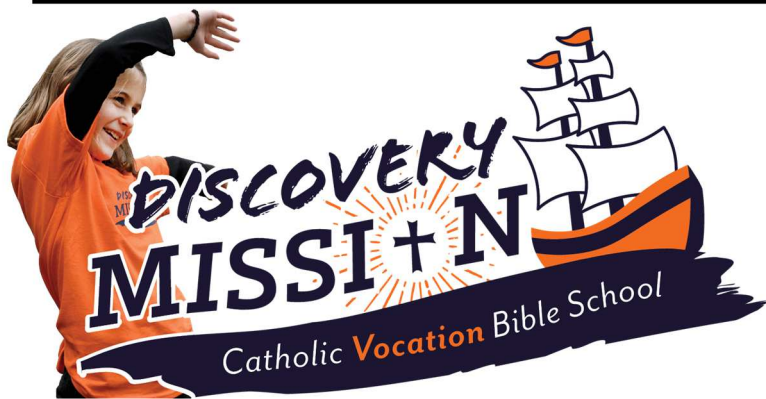


St. Augustin Vocation Bible School Registration Form



Mon., June 19— Fri., June 23rd, 2017

9 a.m. to noon - Church lower level

PreK-3rd grade

COST: \$40 per child - \$90 max per family
includes snacks, crafts, t-shirt and more!

Return this completed form with your registration fee to
St. Augustin Church, 545 42nd St., Des Moines, IA
50312. **Space is limited to 50 children; register now!**

Registration forms must be turned in by Friday, June 9th, 2017

Child's First and Last Name	Age and Birth date	Grade (Fall'16) and Gender	YOUTH T-shirt Size XS (2/4), S (6/8), M (10/12)	Medical and/or Food Concerns
1.				
2.				
3.				
4.				

Family Last Name _____ Father _____ Mother _____

Street Address _____ Cell Phone (Dad) _____ (Mom) _____

City _____ Zip _____ Day time phone (Dad) _____ (Mom) _____

Best E-Mail: _____

Are You: St. Augustin Member Member of Other Church : _____

WOULD YOU LIKE TO HELP WITH VBS? NO YES **If Yes what days are you available?** _____

EMERGENCY CONTACT (other than parent): NAME _____ RELATIONSHIP _____

PHONE _____

In the event you cannot be reached in a serious medical emergency, please provide the following contact information:

Doctor Name _____ Hospital Preference _____

Doctor Phone _____

I give my permission for the above child(ren) to attend Vocation Bible School from Mon. June 19th through Fri. June 23rd.
I release St. Augustin Church, all employees and volunteers from liability due to accident or injury concerning my child(ren).
I understand that I will be called if a problem or emergency arises concerning my child(ren).

_____ (Signature) _____ (Date)