



Clifford Baptist Church VBS 2009
June 21st – June 25th 6:45 pm to 9:00 pm

Online Registration Form

PLEASE COMPLETE AND RETURN TO VISITORS TABLE IN THE VESTIBULE. ALSO HAVE YOUR GUESTS COMPLETE AND BRING FIRST NIGHT THEY ATTEND. THANK YOU!

Name of Adult (Student or Parent/Guardian): _____

Address (PO Box or Street) _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Name of Emergency Contact: _____ Phone: _____

If registering child/children, please name other people who have your permission to pick-up your child from VBS.

Name: _____ Relationship: _____

Name: _____ Relationship: _____

Name: _____ Relationship: _____

VBS Student Registration – Please register every member of your family who will be attending VBS. Ages and last grade completed are only needed for students 18 years old and younger.

Name: _____ Age _____ Last Grade Completed: _____

Allergies & Medical Conditions VBS leaders need to know about: _____

Name: _____ Age _____ Last Grade Completed: _____

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