

# Holy Family Catholic Church Catholic VBS Registration Form



Parents Name: \_\_\_\_\_

Address: \_\_\_\_\_

	Mom Cell #	Dad Cell #
Home #		

Email Address: \_\_\_\_\_

In case of an emergency and you cannot be immediately located please give a name and phone number as an immediate contact: \_\_\_\_\_

Please list other's that will be allowed to bring and pick up your child(ren) from CVBS:

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

NAME OF CHILD	AGE	GRADE COMING OUT OF	FOOD &/OR DRINK ALLERGIES
1) _____			
2) _____			
3) _____			
4) _____			
5) _____			

**Complete one Registration Consent & Waiver Form A per child. Ask if one is already on file.**

Please list the name of the Parish or Church that you normally attend \_\_\_\_\_

Would you be available to help with Catholic Vacation Bible School?

\_\_\_\_\_ Yes, I would be delighted to help. \_\_\_\_\_ No, not at this time, but maybe next year.

If you have any questions about Catholic VBS please contact:

Vicki Gable  
580.536.6355  
catholicvbs@holymfamilylawton.org  
2018 CVBS

## \$15.00 per child

\_\_\_\_\_ Check here if you need scholarship