

# Vacation Bible School Registration Form

Monday, June 5 – Friday, June 9, 9:00 AM – 12:00 PM

330.650.6550

[www.gloriadeihudson.org](http://www.gloriadeihudson.org)



- ✓ Child must be potty trained and completed 1 year of pre-school.
- ✓ Classes are based on grade just completed.
- ✓ Classes are Pre-school age 3 through completion of 5<sup>th</sup> grade.
- ✓ The \$10 per child fee includes: 1 music CD per family, t-shirt, Bible buddies, a free App, snacks, crafts, & more.

↑ Child #1 \_\_\_\_\_ ↑ Age \_\_\_\_\_ ↑ Grade Completed \_\_\_\_\_

↑ Child #2 \_\_\_\_\_ ↑ Age \_\_\_\_\_ ↑ Grade Completed \_\_\_\_\_

↑ Child #3 \_\_\_\_\_ ↑ Age \_\_\_\_\_ ↑ Grade Completed \_\_\_\_\_

↑ Child #4 \_\_\_\_\_ ↑ Age \_\_\_\_\_ ↑ Grade Completed \_\_\_\_\_

↑ Home Address \_\_\_\_\_ ↑ City \_\_\_\_\_ ↑ State \_\_\_\_\_ ↑ Zip Code \_\_\_\_\_

↑ Home Phone \_\_\_\_\_ ↑ Work Phone \_\_\_\_\_ ↑ Cell Phone \_\_\_\_\_

↑ Mother's Name \_\_\_\_\_ ↑ Father's Name \_\_\_\_\_ ↑ Other guardian (For drop off, pick-up, or emergencies) \_\_\_\_\_

↑ Primary E-mail Address \_\_\_\_\_ ↑ Secondary E-mail Address \_\_\_\_\_

↑ Allergies, medical conditions, medications, or any other considerations regarding your child's health – reference child # \_\_\_\_\_

I, \_\_\_\_\_, the legal parent/guardian of \_\_\_\_\_ grant my permission to attend *Gloria Dei Lutheran Church, Vacation Bible School*. I hereby release *Gloria Dei Lutheran Church* from any and all liabilities in case of accident or illness. I authorize any medical care deemed necessary by an accredited physician, nurse, medical personnel, or hospital while attending *Gloria Dei Lutheran Church, Vacation Bible School*. I understand that two adults may not always be in each room or enclosed space.

My child may be photographed for church use.  Yes  No

What church do you attend? \_\_\_\_\_

↑ Parent/Guardian Signature \_\_\_\_\_ ↑ Date \_\_\_\_\_



Mail form & check payable to Gloria Dei Lutheran Church at \$10 per child to:

**VBS Registration**  
**Gloria Dei Lutheran Church**  
**2113 Ravenna Street**  
**Hudson OH 44236**

<b>VBS STAFF USE ONLY</b>
Paid <input type="checkbox"/>
CD <input type="checkbox"/>
T-Shirt <input type="checkbox"/>
Allergy <input type="checkbox"/>