



## VBS Registration Form for Club Zion

**Child's Name** \_\_\_\_\_

Age \_\_\_\_\_ Date of Birth \_\_\_\_\_ Grade 25/26 school year \_\_\_\_\_

Parent/Guardian Name(s) \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Mobile \_\_\_\_\_

Email \_\_\_\_\_ Preferred Contact Method \_\_\_\_\_

T shirt size ( circle one) **Y**- Youth **A**- Adult YS YM YL AS AM AL AXL

### EMERGENCY INFORMATION

Emergency Contact 1 \_\_\_\_\_ Phone \_\_\_\_\_

Emergency Contact 2 \_\_\_\_\_ Phone \_\_\_\_\_

Allergies or Special Needs  
\_\_\_\_\_  
\_\_\_\_\_

### DISMISSAL

Who may pick up your child at the end of class?

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

☐

give my permission for my child to be photographed while attending VBS at Club Zion Community Church.

☐

give my permission for photos to be used on Club Zion's Website and Social Media pages

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