



Registration Card

ATTENDANCE

M	T	W	TH
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MIMOSA LANE BAPTIST CHURCH REGISTRATION FOR VACATION BIBLE SCHOOL

(FOR CHILDREN WHO HAVE COMPLETED PRE-K THROUGH 5TH GRADE – PLEASE NO EXCEPTIONS)

BOY GIRL
CHILD'S

NAME _____ PHONE _____

BIRTHDAY ____/____/____ AGE _____ LAST GRADE COMPLETED _____

SCHOOL _____

ADDRESS _____

CITY _____ ZIP _____

I ATTEND CHURCH SOMETIME NEVER EVERY SUNDAY OFTEN

WHERE? _____

PARENT'S

NAME(S) _____

IN CASE OF EMERGENCY, CONTACT _____ AT _____

IF SERVING AS A VBS WORKER PLEASE INDICATE

WHERE _____

ALLERGIES OR ADDITIONAL

INFORMATION _____

I HEREBY GIVE MY PERMISSION FOR MY CHILD TO PARTICIPATE IN THE SPECIAL EVENTS DURING VACATION BIBLE SCHOOL. I HEREBY AUTHORIZE THE STAFF OF MIMOSA LANE BAPTIST CHURCH TO OBTAIN EMERGENCY MEDICAL TREATMENT FOR MY CHILD SHOULD HE/SHE BECOME ILL OR INJURED.

SIGNATURE OF

PARENT _____ DATE _____