



RESURRECTION CATHOLIC COMMUNITY VACATION BIBLE SCHOOL REGISTRATION

June 19—23, 2017 (9:00a.m. - Noon)

FAMILY NAME _____

MOTHER _____ FATHER _____

ADDRESS _____

HOME PHONE _____ CELL PHONE _____

CHILD(REN)'S LAST NAME (IF DIFFERENT) _____

EMAIL ADDRESS _____ PARISH (IF APPLICABLE) _____

EMERGENCY CONTACT NAME _____ (RELATION) _____

PHONE (Home) _____ (CELL) _____

Child's Name

Grade entering in 2017-2018

PLEASE INDICATE BELOW ANY ADDITIONAL INFO. (I.E. ALLERGIES, SPECIAL NEEDS, ETC.)

ADULT SERVICE

Name	Phone	Email	(check area of interest below)
_____	_____	_____	

- | | |
|---|--|
| _____ <i>SNACK FACTORY</i> | _____ <i>IMAGINATION STATION</i> |
| _____ <i>GAME MAKERS</i> | _____ <i>KIDVID Cinema</i> |
| _____ <i>SOUND Wave Sing & Play (OPENING)</i> | _____ <i>FUNSHOP FINALE</i> |
| _____ <i>BIBLE DISCOVERY (Drama)</i> | _____ <i>AT ANY STATION, AS NEEDED</i> |

I am available (circle one or more): Everyday! Mon. Tues. Wed. Thurs. Fri.

\$25 PER CHILD

Your fee includes the cost of all activities, crafts and daily snacks.

Total enclosed = # of children _____ **X \$25 = \$** _____

**Please return form (with payment) to the Faith Formation office in the Pastoral Center
or to the collection basket by June 11.**