

Brooklawn United Methodist Church
VACATION BIBLE SCHOOL
REGISTRATION FORM

Fill this form out and send ahead of time to the church and receive a **“fast pass sticker”** for opening day of VBS 2019!

Child's Name _____

Grade in September _____ Age _____

Address _____

Town or City _____

Telephone _____

Emergency Contact _____

Emergency Number _____

Allergies _____

Does your child have a brother or sister here at VBS?

___ No ___ Yes

Name _____

I would like information about

___ Church services ___ Sunday School (all ages)
___ Kids Club (K-3) ___ Youth Group (4th-6th)
___ Youth group (7-12) ___ Special events

Please send me information via e-mail at the following address.

Parent signature _____