

Kindergarten
completed
through
6th Grade

First Baptist Colleyville Vacation Bible School

June 7-11 8:45-12:00 noon



CHILD'S FIRST NAME: _____ LAST NAME: _____

BIRTHDATE: _____ Male Female PARENT'S NAME: _____

CIRCLE GRADE COMPLETED BY JUNE 2010 **K, 1, 2, 3, 4, 5, 6**

Birth through PreK can only attend if a parent is on campus and working in VBS

PRESCHOOLER'S BIRTHDATE _____ AGE BY JUNE 7, 2010 _____

PARENT'S LOCATION WHILE VOLUNTEERING AT VBS _____

HOME PH #: _____ CELL #: _____

ADDRESS: _____ CITY: _____ ZIP: _____

EMAIL ADDRESS: _____

Where can you be reached during VBS? _____

Are you a church member at FBCC? Yes No Other: _____

Is your child allergic to any foods? Yes No Explain: _____

Does your child have any medical conditions? _____

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