



2024 Vacation Bible School Registration Form

June 17 – 21 9 AM to Noon

Ages 4 – Grade 5 ,

Please fill out one form per family. Drop it off, mail it or email it to the church office by June 9th

Child Name: \_\_\_\_\_ Age: \_\_\_\_\_ \*Grade: \_\_\_\_\_

Child Name: \_\_\_\_\_ Age: \_\_\_\_\_ \*\*Grade: \_\_\_\_\_

Child Name: \_\_\_\_\_ Age: \_\_\_\_\_ \*\*Grade: \_\_\_\_\_

Child Name: \_\_\_\_\_ Age: \_\_\_\_\_ \*\*Grade: \_\_\_\_\_

\*Child must be potty trained. \*\* Grade refers to grade completed in 2024

Parent/Guardian's Name: \_\_\_\_\_

Address: \_\_\_\_\_ Email Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Emergency Contact:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Who will bring your child to and from Vacation Bible School? Name and relationship: \_\_\_\_\_

Do any of the children listed have medical conditions, food allergies, or learning difficulties?

If Yes, please note: \_\_\_\_\_

Please read this statement before signing: I give permission for my child/children to participate in Vacation Bible School activities at Zion Lutheran Church. I authorize Zion Lutheran Church to use pictures in which my child/children appear that may be displayed in the church, sent to a newspaper for publication, or on the ZLC website/Facebook. In the event of an emergency, I hereby give permission to Zion Lutheran Church volunteers or personnel to act on my behalf for medical assistance for my child/children until such time as I can be contacted.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Zion Lutheran Church ELCA
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