

2025 Vacation Bible School Registration Form June 16 – 20 9 AM to Noon Ages 4 – Grade 5

Please fill out one form per t	family. Drop it off, mail it or	email it to the chur	ch 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 comp	oleted in 2023		
Parent/Guardian's Name:				
Address:				
City:	State:	Zip:		
Primary Phone:	Alternate Phon	e:		
Emergency Contact:				
Name:	Phone:			
Name:	Phone:			
Who will bring your child to a	nd from Vacation Bible Schoo	ol? Name and relation	nship:	
Do any of the children listed ha	ave medical conditions, food a	allergies, or learning of	difficulties?	
If Yes, please note:				
Please read this statement before School activities at Zion Lutherd child/children appear that may be website/Facebook. In the event personnel to act on my behalf fo	an Church. I authorize Zion Lud be displayed in the church, sent of an emergency, I hereby give r medical assistance for my chi	theran Church to use p to a newspaper for pu permission to Zion Lu ld/children until such l	bictures in which my blication, or on the ZLC theran Church volunteers or time as I can be contacted.	
Signature:		Date:		
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