



Christ the Servant Lutheran Church
 Discovery Canyon Vacation Bible School
 August 3-7th, 2009 9am-12noon



REGISTRATION FORM

Child's Name _____ Age _____ Entering Grade _____ Gender: M F

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Parent/Guardian Name _____

Address _____

E-mail _____ Daytime Phone _____ Cell Phone _____

Emergency Contact _____ Phone _____

Please list any allergies/medical needs _____

Tell us anything special you'd like us to know about your child (ie social/behavioral, use back if needed) _____

Home Congregation (if any) _____

- Enclosed is \$10/per child
- Please provide a scholarship for my child
- Enclosed is \$_____ to help another child attend VBS

I can help with the following (please circle):

- | | |
|-----------------------------------------------------------------------------|--------------------------------|
| Preschool Class Helper (1 or more days) | Station Helper(1 or more days) |
| Snacks : assisting with preparation | providing supplies |
| Decorations/Props (including decorating the church August 2 nd) | |

Meagan Dooley is directing VBS as her senior culminating project at Squalicum High School. I give permission to have my child's photo reproduced as part of the presentation for her project.

Signature _____ Date _____

Return this form to:

Christ the Servant Lutheran Church
 2600 Lakeway Dr. Bellingham, WA 98229
office@ctslutheran.org