

2010 Good Shepherd Lutheran Church VBS Registration Form

“New Beginnings”

Please fill out a separate form for each FAMILY
Additional Forms are available in the church office or on our website:

www.GoodShepherdHollandMI.com

Questions? Call the Church office at 616-772-4075 or Chris Manzo at 616-847-8900

Bring registration form to the church office or mail to:

Good Shepherd Lutheran Church, Attn VBS Registration
3990 112th Avenue, Holland, MI 49424

Name of Child _____ Age _____

Attending: (please circle) Picnic August 15th VBS August 16Th 17Th 18th 19th

Name of Child _____ Age _____

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Attending: (please circle) Picnic August 15th VBS August 16Th 17Th 18th 19th

Street Address: _____

City _____ Zip _____

Home Phone(____) _____ Alternate Phone(____) _____

Parent or Guardian's Name _____

Emergency Contact Name/Phone _____ (____) _____

Are your children allergic to anything? _____

Do any of your Children have Food allergies? _____

Any medical concerns we should know about? _____

Is your Child on any medications? YES NO

If yes, what do they take _____

Please list any medication that will be brought to VBS.

Are there any social or emotional concerns? _____

Please add any additional helpful information or comments.

Are there any special friends that your child(ren) would like to be buddied up with while at VBS?

