



# VACATION BIBLE SCHOOL

August 1-5, 2010 6:00 – 8:30 p.m.

Resurrection Lutheran Church (Hosting Church) &  
Church of Saint Joseph

## Family Registration Form

Please turn in no later than July, 20

VBS is open to children ages 4 through grade 6. Please note we are unable to register 3 year olds because we are not equipped to meet their needs. Each day students will make a craft project, eat a snack, play games, hear a Bible story and sing songs that follow the 5 daily themes for the week. They are destined to have fun on this High Seas Expedition.



**FEES:** \$10 per child or \$35 per family. (Additional \$5 late registration fee per family after July 20.)

### FAMILY CONTACT INFORMATION

Parent(s) Name: \_\_\_\_\_

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

Family Address: \_\_\_\_\_  
\_\_\_\_\_

Cell Phone: \_\_\_\_\_

Family Email: \_\_\_\_\_

Currently member of (check one):

Resurrection Lutheran     Church of Saint Joseph     Other Church \_\_\_\_\_

Our family does not belong to a church at this time. Please contact us.

### EMERGENCY INFORMATION

Secondary Contact Information:

Name: \_\_\_\_\_ Relation to child(ren): \_\_\_\_\_

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

In case of an *emergency* involving my child, I give the St. Joseph VBS Coordinator's permission to obtain the medical attention they feel is necessary for my child. Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### OFFICE USE ONLY

Payment Received: \_\_\_\_\_ Cash \_\_\_\_\_ # on Check \_\_\_\_\_ Balance Remaining \$ \_\_\_\_\_

Registrar's Initials: \_\_\_\_\_ Registration Verified \_\_\_\_\_ Received CD \_\_\_\_\_ Received T-Shirts \_\_\_\_\_

## SMALL GROUP PLACEMENT

Group placements are done by the grade that the student completed in Spring of 2010.

Please circle number of the grade your child completed, or in the case of preschool, please circle your child's age.

**We require that every registered 4 & 5 year old have an adult on the Resurrection Lutheran Campus for the duration of VBS.**

<b>Child's Name:</b> _____	
<b>Group placement:</b>	4y Sy K 1 2 3 4 5 6 <small>(PLEASE CIRCLE AN AGE OR GRADE)</small>
<b>T-shirt Size:</b>	<b>Youth Sizes:</b> XS (2-4) S (6-8) M (10-12) L (14-16) <b>Adult Sizes:</b> S M L XL <small>(PLEASE CIRCLE A SHIRT SIZE)</small>
<b>Medical Concerns (if any):</b>	
<hr/>	
<b>Child's Name:</b> _____	
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<b>Medical Concerns (if any):</b>	
<hr/>	
<b>Child's Name:</b> _____	
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<b>Medical Concerns (if any):</b>	

### Picture Release

I, the undersigned, hereby grant permission for all photographs taken of the above named children at Saint Joseph Community Vacation Bible School to be used for crafts, publicity, or advertising for the program.

Guardian Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_

**STATION HELPER (Volunteer?):** \_Galley Goodies; \_Floating Finale (skits); \_Ship Rec Games; \_Sail Away Cinema;

\_Bible Voyage; \_Clipper Ship Crafts; \_Sing & Play Splash

**SMALL GROUP LEADER (Volunteer?):** \_4 year aids; \_5 year aids; \_Kindergarten; \_Grade 1; \_Grade 2;

\_Grade 3; \_Grades 4-5-6

**PLEASE MAIL COMPLETED FORMS TO:** Saint Joseph VBS  
c/o Resurrection Lutheran Church  
PO Box 549  
Saint Joseph, MN 56374