## 2024 VBS Registration Form July 15-18, 9:00am-Noon Chattaroy Community Church

#1 Child's name			
Gender: M F	Age		Grade <b>going into</b>
Allergies/Concerns			
#2 Child's name			
Gender: M F	Age		Grade <b>going into</b>
Allergies/Concerns			
#3 Child's name			
Gender: M F	Age		Grade <b>going into</b>
Allergies/Concerns			
#4 Child's name			
Gender: M F	Age		Grade <b>going into</b>
Allergies/Concerns			
Mailing Address			
			Zip
Parents/Guardian (please pr	rint)		
Phone			
Emergency contact Name/F	Phone		
Home Church			
Please use the back if you need	d to add more name	es. Thanks!	
I hereby give my permission Church VBS and any special ac			ttend and participate in Chattaroy Community
I do herewith authorize emerg- reach us/me the parent(s) or g		given if necessary c	only after a reasonable effort has been made to
	ties or claims for pe	ersonal injury or illne	he VBS Leadership and Chattaroy Community ss which may be incurred by my child while at
participating in approved VBS VBS and its activities within Ch	activities, photogra nattaroy Community all claims that I may	uphs and videotape Church. I further re y have against them	and leaders permission, that, while my child is of my child may be taken for use in promoting lease Chattaroy Community Church and its state as a result of my child's picture being used in seed on social media.)
Parent/Guardian Signature:			Date: