REGISTRATION FORM \$10/child: max. \$25 per family

Guardian(s) name		
Address		
Phone		
In Case of Emergency, contact		The second second
	Phone	
Name (a) of Children		
Name(s) of Child(ren)	T	
Name	Name	
Age/Grade Completed	Age/Grade Completed	
T-shirt size: Youth/Adult S,M,L,XL,2XL	T-shirt size: Youth/Adult S,M,L,XL,2XL	
Sport Choice (indicate 1st, 2nd preference)	Sport Choice (indicate 1 st , 2 nd preference)	
Soccer	Soccer	
Basketball	Basketball	
Cheerleading	Cheerleading	
Spirit (arts and crafts)	Spirit (arts and crafts)	
Preschool (ages 4-Kindergarten *must be potty trained)	Preschool (ages 4-Kindergarten *must be potty	trained)
Name	Name	
Age/Grade Completed	Age/Grade Completed	_
T-shirt size: Youth/Adult S,M,L,XL,2XL	T-shirt size: Youth/Adult S,M,L,XL,2XL	
Sport Choice (indicate 1st, 2nd preference)	Sport Choice (indicate 1st, 2nd preference)	
Soccer	Soccer	
Basketball	Basketball	
Cheerleading	Cheerleading	
Spirit (arts and crafts)	Spirit (arts and crafts)	
Preschool (ages 4-Kindergarten *must be potty trained)	Preschool (ages 4-Kindergarten *must be potty	r trained)
Trescribor (ages 4-kindergarteri must be potty trained)	Trescribor (ages 4-killuergarteir illust be potty	traineu)
Children should wear close toed shoes	to VBS for all sport/activity categories.	
Please list any special concerns and which child the	ey pertain to: (Allergies, Medications, Medica	al Conditions, etc.)
PICTURE RELEASE:		
I give permission to Northwest Hills Church and Lo	ard of Lova Church to take nictures of my chi	ld during Vacation Piblo
School. I understand that these pictures may be po	·	
websites or social media accounts.	sted internally at the charciles, or apidaded	Tor use on the church
Guardian Name Printed	Signature	Date
My child is allowed to participate in all Vacation B	Bible School activities.	
Name of Guardian	Signature	Date