



FBC Kenedy VBS Registration  
July 24th-July 27th 5:30p.m.—8:00p.m.  
(Pre-Kinder thru 5th grades completed)

Child's Name \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Phone Numbers

Home: \_\_\_\_\_ Cell: \_\_\_\_\_

Age Information

Birth Date \_\_\_\_\_ Last Grade Completed \_\_\_\_\_

Medical Information

Medical or other information we need to know (Please include any food or other allergies) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Emergency Contacts (Other than listed above)

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Dismissal Information

Who may pick up your child at the end of each VBS session?

\_\_\_\_\_

Other Information

Does your family attend church? If so where? \_\_\_\_\_

May we have permission to photograph your child? ( ) Yes ( ) No