



VACATION BIBLE SCHOOL REGISTRATION FORM

Zion Iona U.M. Church
1920 S. Fifth Ave., Lebanon, PA 17042

JUNE 26 - 28, 2017, 6:30 P.M.

Ages 3 - 5th grade

*(one form per child—please return to the church by **JUNE 12**)*

Child's name: _____ Child's gender: _____

Child's age: _____ Date of birth: _____ Last school grade completed: _____

Name of parent(s): _____

Street address: _____

City: _____ State: _____ ZIP: _____

Home telephone: (____) _____

Parent/caregiver's cell phone: (____) _____

Home email address: _____

Home church: _____

Crew number or name *(for church use only)*: _____

Allergies or other medical conditions: _____

In case of emergency, contact: _____



Phone: _____

Relationship to child:
