

VBS Registration Form
 (one form per child, please)
 FAX to 956-565-6134

For office use only	
Group name	
Crew #	

PLEASE CHECK GRADE COMPLETED

PK4	K	1 st		2 nd	3 rd	4 th	5 th	6 th
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Child's Name	
Age	
Address	
City/Zip	
Phone	
Father's Name	
Mother's Name	
Emergency phone #	
Home Church	
Allergies or other medical conditions	