

S  
A  
S  
J



V  
B  
S

### Students Pre-K (4) to 5th Grade

Student's Name \_\_\_\_\_

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

Address \_\_\_\_\_

E-mail Address \_\_\_\_\_

Phone Numbers

Home \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_

Date of birth \_\_\_\_\_ Age \_\_\_\_\_

Last school grade completed \_\_\_\_\_

Allergies/Medical Information/Other (Please Be Specific)

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

Emergency Contacts: Name, Relation and Phone Number(s)

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

Dismissal Information Name(s) of person(s) who may pick up this child from VBS \_\_\_\_\_

Are you interested in volunteering? \_\_\_\_\_ Or Donating Supplies? \_\_\_\_\_

Registration Fee: **\$20.00 per Student** \_\_\_\_\_ OR

**Volunteer to help and your child attends for free!!**

Please return registrations to the office at St. Anne (216 East Liberty) 803-773-3524