



VBS Registration Form
(one form for each child please)

**All students entering grades Kindergarten - 5
are welcome to join us for our Vacation Bible School
Monday July 23rd thru Friday July 27th
9 am – 12 noon**

St. James Church Hall

**Cost: 1 child - \$20
2 children- \$35
3 children- \$45 (Max family total)
(4th child and on are free)**

(Payment at time of registration please. Checks can be made out to St. James Church)

**Please mail or drop completed form off at the St. James Parish Office 147 Main St. Johnson City, NY 13790,
or place in the collection basket in an envelope marked VBS.**

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Name _____ Grade (18/19 school year) _____

Nickname/preferred name to be called _____

Parents'/Guardian Name _____

Address _____

Phone #'s home _____ cell _____ Email Address _____

*Emergency Contact Name and phone # _____
(Who we call in case of an emergency **during VBS hours**- if contact is not a parent; please give the relation to the child)

Allergies/Medical Alerts/ or important info you want us to know about your child: _____

I consent to the participation of my child, _____, in the event described above. While in the care of the above supervision, authorization is given to seek emergency medical care. I will not hold the Office of Religious Ed., Diocese of Syracuse, nor St. James Parish responsible in the event of injury.

Print Parent/Guardian Name

Parent/Guardian Signature

I understand that pictures may be taken during this St. James event.
I hereby GRANT DO NOT GRANT (Please circle one) permission for St. James Church to use pictures of my child in online communications, including the parish website, for informational or promotional purposes.

Parent/Guardian Signature

Date