

Vacation Bible School at The Chapel

REGISTRATION INFORMATION

The Chapel is excited to provide Vacation Bible School as a free event in our community. Because of the success of our program and because we can only accommodate a limited number of students in our building, we ask you to remember these guidelines:

1. If you register your children and find that your plans change, please call us and cancel your reservations.
2. If your child is not in attendance on Monday, we will offer that opportunity to another child.
3. Please communicate with us about changes in your schedule which may affect your child's attendance.
4. We will closely monitor our pre-registration enrollment. Therefore, we are planning on a pre-registration **deadline** of June 30.
5. After June 30, we will place names on a waiting list. If an opening is available, we will notify you of your child's placement.
6. ***If*** there is still availability in our grade 1 – 5 program, we will continue to have registration on the first day of VBS. All pre-registered students will have been already added to our roster.
7. Please keep the top portion of this form for your records. Tear off the bottom of this form, complete with parent's signature and mail to, or drop off at The Chapel. Additional forms may be downloaded from our website: www.YourPlaceToBelong.com



VBS REGISTRATION FORM

July 13-17, 2009 ~ 9:00-11:40 AM

The Chapel ~ 4250 Washington Ave., St. Joseph, 49085

This form is to be filled out by registrant's parent or guardian ONLY.

Child's Name: _____ Today's Date: _____

Date of Birth: _____ Grade Entering in Fall 2009 (circle one) K 1 2 3 4 5

Parent/Guardian Name: _____

Address: _____

City: _____ Zip: _____

Phone # (to reach you during VBS if necessary): _____

Emergency Contact: _____ Phone: _____

Home Church: _____

Food Allergies or other health concerns: _____

Name of siblings in our program: _____

Name of others who have permission to pick up your child: _____

Name of person who invited you to VBS: _____

I hereby give The Chapel permission to photograph my child and to use the photos for the promotion and marketing of The Chapel and future VBS programs: YES NO

Parent or Guardian Signature: _____