



Total # of Students: \_\_\_\_\_

<b>Below for PGBC Office use only:</b>										<b>PGBC VBS Staff Notes:</b>		
Tee Shirt Sizes:		XS	S	M	L	XL	2X				_____	
Grades:		P-K	K	1	2	3	4	5	6	7	_____	
											_____	

Parent/Guardian Information											
Parent/Guardian 1					Parent/Guardian 2						
<b>Home Address:</b>					<b>Street</b>		<b>City</b>		<b>State</b>	<b>Zip Code</b>	
<b>Mailing Address:</b>					<i>Only if Different From Above</i>		<b>City</b>		<b>State</b>	<b>Zip Code</b>	
<b>Phone Home</b>		<b>Work</b>		<b>Cell</b>			<b>Email</b>				

Emergency Contacts: <i>Other Than Parent/Guardian Listed Above</i>							
Name		Phone Number		Name		Phone Number	

Dismissal Information: <i>Who may pick up your child at the end of each VBS day?</i>							
Name		Phone Number		Name		Phone Number	

Student Information									
		Child 1		Child 2		Child 3		Child 4	
<b>First Name:</b>									
<b>Last Name:</b>									
<b>Birthdate:</b>									
<b>Shirt Size:</b>		Youth	Adult	Youth	Adult	Youth	Adult	Youth	Adult
<b>Medical/Allergies:</b>									
<b>Medical Details:</b>									
<b>Last Grade:</b>									
<b>Does your child attend Sunday School?</b>		Yes	No	Yes	No	Yes	No	Yes	No
<b>If so, where:</b>									
<b>Guest of:</b>									
<b>Photo Consent:</b>		Yes	No	Yes	No	Yes	No	Yes	No
<b>Photo Promo. Consent:</b>		Yes	No	Yes	No	Yes	No	Yes	No