

Please complete this form for each child attending, then return it to the Education mailbox as soon as possible.

Alto Reformed Church Student Information & VBS Pre-registration

(Please contact the Christian Education office to update this information, if necessary.)

Child's Name (first and last) _____

Address _____

City _____ Zip Code _____

Grade in School/Entering This Year _____ Birthdate _____

Name of Siblings Attending (and grade/age) _____

Allergies _____

Medications _____

Significant Medical History (use back side, if needed) _____

Home Church & Location _____

Parent Name(s) _____

Home Phone _____

Work Phone(s) _____

Cell Phone(s) _____

Email Address _____

Are you on the Alto Reformed Church prayer chain/cancellation list? (circle all that apply)

Yes-email

Yes-phone

No

If not, may we include the email address above so that you will be notified year-round of prayer requests and event cancellations (rather than calling each student)? (circle one)

Yes

No

Emergency Contact (*non-parent*) _____

Relationship to Child _____

Phone Number _____

Parent Signature _____ Date _____

In signing this form, I understand that Alto Reformed Church values the safety of my child, and I release the church and any of its participants from legal responsibility for my child.

Circle one-> **My child (will will not) attend Vacation Bible School August 17-21, 2009.**