



# VACATION BIBLE SCHOOL

**July 17–20, 2018 9:00 am–11:30am**

**\$35/Child \$70/Family**

**Ages 4 to 11 (camp assistants ages 12-17)**

**(Please submit check with form)**

<b>CHILD(ren) Name(s)</b>	<b>Age(s)</b>	<b>Allergies/Medical Concerns</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**PARENT NAME(s):** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**HOME PHONE:** \_\_\_\_\_

**CELL PHONE:** \_\_\_\_\_

**EMERGENCY (NAME & NUMBER):** \_\_\_\_\_

*NOTE: For the protection of your child and St. Ann's, it is imperative that we have your child's medical information. If your child has allergies, learning disabilities or is on medication, etc. please indicate on the form. This information will help us place your child with a teacher best suited to them and the information will only be shared with their teacher. Otherwise, it will be kept confidential. It is understood that by submitting this form you are giving permission to take pictures of your child for the purpose of identification and for group photos.*

**Parent Signature:** \_\_\_\_\_

