



2008 Vacation Bible School

Registration Form (one for each child, please)

August 4-8, 9:00 a.m. to 12:00 noon

at the Walworth United Methodist Church and the Second Baptist Church of Walworth
Open to children age 4 through children who have completed 6th grade*

Child's Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home telephone: (_____) _____ E-mail address: _____

Date of birth: _____ Last school grade completed: _____

Parent or Guardian Name/s: _____

In case of emergency, contact: _____

Emergency phone # if different from above: (_____) _____

May child be released to anyone different than the parent/s or guardian/s listed above? _____ If yes,
please indicate name/s of person/s to whom child may be released:

Allergies (foods, medications, bee stings, etc.) and Medical Conditions:

(over, please)

Home Church: _____

Name of a special friend your child might like to be with:

***Youth who have completed 5th or 6th grade can choose to participate in Power Lab by being in a regular Crew and enjoying all of the activities or they can choose to be a helper in one of the activities.**

☐ I would like to be in a regular Crew.

☐ I would like to be an Assistant Crew Leader.

☐ I would like to be a helper at the Crafts Station.

☐ I would like to be a helper at the Games Station.

☐ I would like to be a helper with Bible Stories and Drama.

☐ I would like to be a helper at the Snacks Station.

☐ In addition to the area I checked above, I would be willing to help with Registration on Monday.

Would you like to attend Power Lab along with your child as a volunteer?

☐ Yes, I would like to volunteer. My name is _____.

Please contact me at _____.

If you would like to make a donation to help with Vacation Bible School expenses, please send to:

Walworth Council of Churches
P.O. Box 564
Walworth, NY 14568

Please turn in registration forms by July 21 to:

Sue Gibson
2086 Johnny Lane
Walworth, NY 14568
(315) 986-1748
gibsons1@verizon.ne