



**REGISTRATION FORM**  
**VACATION BIBLE SCHOOL**

THE NATIONAL PRESBYTERIAN CHURCH

**JULY 11 — 15, 2011**

**9:30 am — 12:30 pm**

(DROP OFF BEGINS AT 9:00)

*Space is limited and spots fill quickly. Register today!*

PLEASE FILL OUT A REGISTRATION FORM FOR EACH CHILD ATTENDING

NURSERY THRU RISING 5<sup>TH</sup> GRADERS (Nursery thru 2s class available to on-site volunteers only)

**#1**

Child's Name: \_\_\_\_\_ Child's age as of 7/11/11: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Child's grade in Sept. 2011: \_\_\_\_\_

Parent Name(s): \_\_\_\_\_ Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Home Address: \_\_\_\_\_

**#2**

**Registration Fee: \$20 per child or \$50 maximum per family**

**Pandamania CD of songs/music (optional): \$7 each**

**T-Shirt (optional) \$12 each**

<b>T-Shirt size:</b>	Child XS (2-4)	Child S (6-8)	Child M (10-12)	Child L (14-16)
	Adult S	Adult M	Adult L	

Check  or cash  enclosed      **TOTAL ENCLOSED: \$ \_\_\_\_\_**

**#3**

*Please check one area in which you can assist with VBS*

- Elementary Crew Leader** (spend each day with a group of Elementary Kids)
- Preschool Crew Leader** (spend each day with a group of Preschoolers)
- Station Leader** (circle CRAFT; MOVIE; SNACK; RECREATION; BIBLE STORY)
  
- PRE-VBS: Decorating** (spend the Sunday before VBS turning our church into a jungle!)
- PRE-VBS: Snack Supplier** (bring in snacks for kids and/or for teacher break room)

**#4**

**Please send this form and payment by 6/29/2011 to:**

**The National Presbyterian Church**  
**4101 Nebraska Ave NW**  
**Washington, DC 20016**  
**Attn: Jill Meek**

**All children must be registered prior to 7/7/2011.**  
*No walk-in registrations, please.*

*Have questions? Need more info? Please contact Jill Meek at 202.537.7535 or [jmeek@nationalpres.org](mailto:jmeek@nationalpres.org)*

**PANDAMANIA VBS**  
**July 11-15, 2011**  
**Emergency Contacts and Medical Authorization**

**Child(ren)'s Name(s):** \_\_\_\_\_

\_\_\_\_\_

**Known allergies/health conditions:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**MEDICAL AUTHORIZATION:**

**In the event of accident, injury, or illness, I authorize any and all medical attention necessary to be administered to my child(ren), listed above, under the direction of the following medical professionals:**

**Physician name(s) and address(es):** \_\_\_\_\_

\_\_\_\_\_

**Physician phone number(s):** \_\_\_\_\_

**Medical Insurance**

**Company:** \_\_\_\_\_

**Policy Number:** \_\_\_\_\_

**Group or ID #:** \_\_\_\_\_

**Other contacts in the event of an emergency:**

**Name:** \_\_\_\_\_

**Relation:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

# The National Presbyterian Church Vacation Bible School 2011

## AUTHORIZATION FOR RELEASE OF CHILD

I authorize the following person(s)\* to pick up my child(ren),

\_\_\_\_\_,  
child/children name

after Vacation Bible School at The National Presbyterian Church (please list parent names, including yourself if appropriate, as well as other authorized adults):

Person's Name	Relationship to Child

*\*Any authorized person must be at least in 6<sup>th</sup> grade.*

Please note that teachers cannot release your child to anyone who is not listed on this form. All persons picking up children will be required to initial a dismissal record each day for each child.

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Parent's Contact Number

\_\_\_\_\_  
Date