



Mother's Name: _____

Father's Name: _____

Address _____

City _____ St./Zip _____

Phone _____ Email _____

Name of Home Church: _____

Emergency Contact Person:

Name _____ Phone # _____

1st

Child's Name: _____

Birth Date: _____ Age: _____

School Grade in the fall of 2017: _____

T-Shirt Size: S M L

3rd

Child's Name: _____

Birth Date: _____ Age: _____

School Grade in the fall of 2017: _____

T-Shirt Size: S M L

2nd

Child's Name: _____

Birth Date: _____ Age: _____

School Grade in the fall of 2017: _____

T-Shirt Size: S M L

4th

Child's Name: _____

Birth Date: _____ Age: _____

School Grade in the fall of 2017: _____

T-Shirt Size: S M L

For current 4 year old preschool up to those entering the 5th grade

June 19th thru 22nd, 9:30-12:30 PM

Cost is \$20.00 per child

Cap is \$40 per family

Make Checks payable to: Assumption BVM

Contact Cheryl Sokolowski with any questions at: 361-5126x257 or religiouseddirector@assumptionbvm.com

To volunteer, click the link to SignUpGenius: <http://www.signupgenius.com/go/30e084aa8a72fa3f85-vbs2017>