

Please place the completed Registration Form with the payment in an envelope,  
marked **VBS** and your name.

Put it in the Rectory mail slot or in the Collection Basket by **July 11**.

Make checks payable to **Holy Trinity Parish**.

## **+VACATION BIBLE SCHOOL+** **REGISTRATION FORM**

(July 26-30 ~ 6:00 – 8:00 PM)

**FAMILY NAME:** \_\_\_\_\_

**CHILDREN:** 1. \_\_\_\_\_ GRADE: (This past year '20-21) \_\_\_\_\_

2. \_\_\_\_\_ GRADE: (This past year '20-21) \_\_\_\_\_

3. \_\_\_\_\_ GRADE: (This past year '20-21) \_\_\_\_\_

4. \_\_\_\_\_ GRADE: (This past year '20-21) \_\_\_\_\_

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

**PHONE:** Cell: \_\_\_\_\_ House: \_\_\_\_\_

**EMERGENCY CONTACT PERSON:** \_\_\_\_\_

Cell Phone: \_\_\_\_\_

**Email:** \_\_\_\_\_

**CHURCH:** \_\_\_\_\_

**ANY KNOWN ALLERGIES** \_\_\_\_\_

**Registration Fee:** (\$10.00 PER CHILD)  
(\$25.00 FOR THREE OR MORE CHILDREN)

**TOTAL PAYMENT RECEIVED:** \$ \_\_\_\_\_ Cash \$ \_\_\_\_\_ Check \$ \_\_\_\_\_  
(Payable to Holy Trinity Parish)