



# VBS Registration 2026

Monday July 6th - Thursday July 9th

8:30 am - 11:30 am

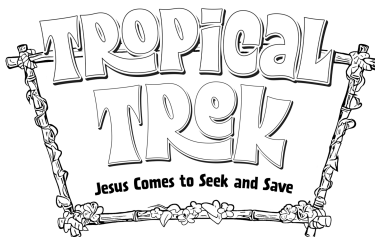
3 years old - entering 6th grade

|   |  |
|---|--|
| Child #1 Name:                                      |  |
| Grade entering in fall 2026:                        |  |
| Allergies:<br>Yes or No (please list if yes)        |  |
| Medical Concerns:<br>Yes or No (please list if yes) |  |

|   |  |
|---|--|
| Child #2 Name:                                      |  |
| Grade entering in fall 2026:                        |  |
| Allergies:<br>Yes or No (please list if yes)        |  |
| Medical Concerns:<br>Yes or No (please list if yes) |  |

|   |  |
|---|--|
| Child #3 Name:                                      |  |
| Grade entering in fall 2026:                        |  |
| Allergies:<br>Yes or No (please list if yes)        |  |
| Medical Concerns:<br>Yes or No (please list if yes) |  |

|   |  |
|---|--|
| Child #4 Name:                                      |  |
| Grade entering in fall 2026:                        |  |
| Allergies:<br>Yes or No (please list if yes)        |  |
| Medical Concerns:<br>Yes or No (please list if yes) |  |



Parent/Guardian: \_\_\_\_\_

Street Address: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Emergency Contact Phone: \_\_\_\_\_

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

Child's Doctor: \_\_\_\_\_ Doctor's Phone: \_\_\_\_\_

Church membership: \_\_\_\_\_

If not a member of St. Peter's, would you like to learn more about St. Peter's Lutheran Church? Yes or No

*PLEASE NOTE: VBS leaders have my permission to photograph/film the minor(s) designated above for any lawful purpose associated with this VBS program. By signing below you give permission to attend VBS and all stated above.*

Parent's signature: \_\_\_\_\_

Liability Disclosure: Every activity sponsored by St. Peter's Lutheran Church is carefully planned and adequately supervised by mature adults. However, even with the best planning and precaution, unforeseen events can occur. This disclosure is made to all participants, whether through his/her parent or guardian or as an adult on his/her own behalf, to inform them they assume all risk of damage, loss, or injury to the person or property for which St. Peter's Lutheran Church and its employees and volunteers are not negligent. By my initials, I indicate that I have read and understand this statement.

Initials: \_\_\_\_\_