

**Vacation Bible School**  
**REGISTRATION FORM (One per child)**  
**\*\*\*FREE\*\*\***



**June 25 - 29 @ 9:00 am to 12:00 noon**

For kids who **completed** Kindergarten through 5th grade.

**(Final day to Pre-Register June 20 @ noon)**

PLEASE PRINT CLEARLY

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_

ZIP \_\_\_\_\_ HAVE YOU ATTENDED GCC VBS BEFORE? Y N

Child's Age: \_\_\_\_\_ M F (circle one) BIRTHDATE \_\_\_\_ - \_\_\_\_ - \_\_\_\_ GRADE COMPLETED \_\_\_\_\_

NAME OF SCHOOL \_\_\_\_\_ HOME SCHOOLED

HOME CHURCH \_\_\_\_\_


SIBLINGS ALSO REGISTERED FOR VBS \_\_\_\_\_

NAME OF 1 FRIEND I WOULD LIKE IN MY GROUP (Same grade and must be pre-registered)

 Allergies or other medical conditions \_\_\_\_\_

MEDICAL RELEASE:

*In the event that I cannot be reached in an emergency during Vacation Bible School, I hereby give my permission to a physician selected by Grace Community Church to hospitalize and/or secure proper treatment for my child as deemed necessary.*

 Photo Release:

I give my permission to GCC to post photos that include my children on the GCC website. I understand that, at any time, I can rescind my permission by sending a written request to Grace Community Church.

I DO NOT give my permission to GCC to post photos of my children.

Print Parent/Caregiver's Name \_\_\_\_\_

Relationship to child \_\_\_\_\_ Emergency Phone # \_\_\_\_\_

Signature of Parent/Caregiver \_\_\_\_\_

**Grace Community Church**

Mail/drop off Registration forms at our SOUTH CAMPUS OFFICE: 2525 S. Lovers Lane, 93292

VBS is happening at our NORTH CAMPUS: 424 N. Lovers Lane Visalia, CA 93292

Telephone: 733-3966, #118 • E-mail: [bkalmink@gccvisalia.org](mailto:bkalmink@gccvisalia.org)

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