

ST. BERNARD'S VACATION BIBLE SCHOOL REGISTRATION



I am enrolling a child in preschool: 3 ½ years _____ or 4 years _____

OR PLEASE CHECK GRADE JUST COMPLETED

Pre -K ____ K ____ Grade 1 ____ Grade 2 ____ Grade 3 ____ Grade 4 ____ Grade 5 ____

Student Name: _____

Parent/Guardian Name _____

Parent email address: _____ Home Phone: _____

Cell phone: _____ Work phone: _____

T-shirt size: (circle one) y/xs (2-4) y/sm (6-8) med (10-12) y/lg (14-16) Adult S M L XL

Emergency Contact Name: _____

Phone: _____ Relationship _____

Please list any food allergies or other dietary special needs: _____

Other special needs: _____

Parent/Guardian Signature

Date

OFFICE USE ONLY – Cost: \$75.00 per child

Cash Amount: _____ Check#/Amount: _____/_____ C. Card Amount: _____

