

Check if you need transportation

**Paramount Baptist Church  
2018 VBS Registration Form \*ONLINE**

**PARENT/GUARDIAN INFORMATION**

Name: \_\_\_\_\_ Cell: \_\_\_\_\_

Name: \_\_\_\_\_ Cell: \_\_\_\_\_

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home phone \_\_\_\_\_

**EMERGENCY CONTACTS (other than parent/guardian named above)**

Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Name \_\_\_\_\_ Phone Number \_\_\_\_\_

**PICK UP INFORMATION**

We try to remember your face, but with so many children it's difficult. So, please provide us with a special "code word" to be supplied by ANYONE (including you) attempting to pick up your children. This helps us assure your children will be released **ONLY** to you or the individuals you authorize.

Family "Code Word": \_\_\_\_\_

**OTHER INFORMATION**

Do you attend church?      Yes      No

If so, where? \_\_\_\_\_

May we have permission to photograph your children for internal and external promotion?      Yes      No

**CHILD #1 INFORMATION**

Name: \_\_\_\_\_

Age \_\_\_\_\_

Last grade completed in school \_\_\_\_\_

Medical or other information we need to know (please include any food or medical allergies.) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**CHILD #2 INFORMATION**

Name: \_\_\_\_\_

Age \_\_\_\_\_

Last grade completed in school \_\_\_\_\_

Medical or other information we need to know (please include any food or medical allergies.) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**CHILD #3 INFORMATION**

Name: \_\_\_\_\_

Age \_\_\_\_\_

Last grade completed in school \_\_\_\_\_

Medical or other information we need to know (please include any food or medical allergies.) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**CHILD #4 INFORMATION**

Name: \_\_\_\_\_

Age \_\_\_\_\_

Last grade completed in school \_\_\_\_\_

Medical or other information we need to know (please include any food or medical allergies.) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**CHILD #5 INFORMATION**

Name: \_\_\_\_\_

Age \_\_\_\_\_

Last grade completed in school \_\_\_\_\_

Medical or other information we need to know (please include any food or medical allergies.) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Thank you for allowing us to share Christ with your children!**

***\*ONLINE***