

VACATION BIBLE SCHOOL REGISTRATION FORM

(one per child – ages 4 years through 5th grade)



July 8-12, 2019 9:00 am – 12 noon

Park Lake Presbyterian Church

309 East Colonial Drive • Orlando, FL 32801

407-841-6550 • www.plpc.org



Child's Name: _____

Child Attends PLPC
Child Care?: Yes

Parent/Guardian's Name: _____

Address: _____ City: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____

Email addresses: _____

Birthdate: _____ Age: _____ Grade entering in August: _____

Will child attend VBS Aftercare? Yes ___ No ___ If Yes, please complete separate VBS Aftercare Form.

Would you like more information about Park Lake Presbyterian Church? Yes No

How did you hear about us? Church member friend of member Child Care family

friend of Child Care family website sign other: Z88 or _____

Name and phone number of person signing this child in/out from VBS each day: _____

Allergies or other medical conditions including food allergies: _____

In case of emergency, when the Parent/Guardian cannot be reached, please contact:

Name: _____ Phone: _____

Relationship: _____

I hereby give authorization for my child to have their photo taken during the VBS events and also give my permission for the photos to be used in the Park Lake Presbyterian newsletter, website or other publications.

Parent/Guardian signature: _____

Register early: Space is limited! \$10 before July 2, \$15 after July 2.
Cost \$15 Scholarships available. Contact carolparklake@gmail.com for info.
after July 2 Music CD included in registration fee (one per family)

**PLEASE RETURN THIS FORM AND REGISTRATION FEE
TO THE CHURCH OFFICE**

PAID \$ _____
Ck# _____
Cash <input type="checkbox"/>
<input type="checkbox"/> New
<input type="checkbox"/> Returning