

TRINITY UCC VACATION BIBLE SCHOOL
- REGISTRATION FORM -

(Please PRINT CLEARLY)

Parent's Name

Address

Phone # Emergency Phone # Email Address

Child 1 Name Age Last Grade Completed

Child 2 Name Age Last Grade Completed

Child 3 Name Age Last Grade Completed

Child 4 Name Age Last Grade Completed

Medical or Allergy Information:

Child 1

Child 2

Child 3

Child 4

Comments:

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