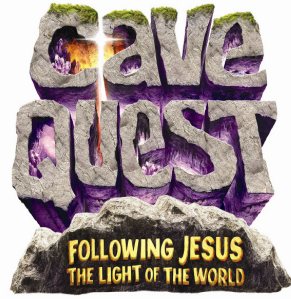


Hope Lutheran Church presents:

Cave Quest Vacation Bible School

Aug. 7-10th, 2017 @ 9am - 11:45am

Registration Deadline: June 30th, 2017



Parent Information:

Parent/Guardian Name(s): _____

Address: _____

Phone #: _____ Family E-mail: _____

Children to be registered for Vacation Bible School (Please register them for one of the grades listed in the box to the left):

Child #1 Name: _____

Date of Birth: _____ Grade in Fall 2017: _____

Child #2 Name: _____

Date of Birth: _____ Grade in Fall 2017: _____

Child #3 Name: _____

Date of Birth: _____ Grade in Fall 2017: _____

We will have separate groups for the different grade levels. Please select from the groups listed below:

- Preschool: 3 years old
- Pre-K: 4-5 years old
- Kindergarten
- Grades 1-4

Emergency contact person: _____ (during VBS time) Phone Number: _____

Does your child have any health concerns, food allergies, or special teaching needs of which we should be aware?
___ yes ___ no

Please list: _____

Waiver:

I authorize the above child(ren) to participate in Vacation Bible School at Hope Lutheran Church.
I authorize emergency medical treatment for the above child(ren) provided that I cannot be reached.
I give permission for the above child(ren) to be video/photographed for Hope Lutheran Church to use in their brochures, newsletters, worship presentation and media communication (i.e. Hope's website and facebook page).

By signing, you accept this waiver and your registration will be processed.

Guardians Signature _____

*****Please include the supply fee of \$12 per child up to a maximum of \$30 per family to help cover the costs of supplies. If registration is received after June 30th the fee is \$17/child (\$45/max.).
Make Check out to Hope Lutheran Church. THANK YOU FOR YOUR SUPPORT!**

Parental involvement is vital to a great program, and there are many opportunities that are available for you both during and prior to the week of VBS. Please consider how you will share your gifts of time and talent with VBS, and someone from our planning team will contact you soon!

Questions?? Call Hope Lutheran Church at 952-492-2099

Office Use Only Date Received _____ Fee: \$ _____ Cash _____ Check _____