

# VACATION BIBLE SCHOOL



**WHERE:** The Church of the Covenant,  
267 E. Beau Street, Washington, PA 15301

**WHEN:** July 15-19, 2019 9:00 am-Noon

**WHO:** Children age 4 by July 1st - those completing  
5th Grade are welcome!

A \$10.00 donation/child is appreciated.

**Please return completed registration forms by July 1<sup>st</sup>  
in order to receive a VBS music CD (one per family)  
Spaces will be limited.**

Forms can be sent to the church office,  
Checks may be written to "The Church of the Covenant"  
with VBS in the memo.

**All children attending VBS will receive a T-shirt on Friday.**

**ALL CHILDREN ARE ASKED TO PLEASE WEAR TENNIS SHOES!  
NO SANDALS OR FLIP FLOPS FOR SAFETY REASONS!**

**VBS closing program and picnic - Friday, July 19th@ 12:00pm  
Come see what the children have been doing all week!**

**QUESTIONS? Please contact Jessica Hickman  
through the church office - 724-222-0190.**

**Keep this portion as your VBS reminder and return the other half  
for children's registration. One registration form per child please.**

## Registration Form (One Per Child)



Child's name: \_\_\_\_\_

Child's gender: \_\_\_\_\_

Child's age: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Last school grade completed: \_\_\_\_\_

Name of parent(s): \_\_\_\_\_

Street address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Home telephone: (\_\_\_\_\_) \_\_\_\_\_

Parent/caregiver's cell phone: (\_\_\_\_\_) \_\_\_\_\_

Home email address: \_\_\_\_\_

Home church: \_\_\_\_\_

Allergies or other medical conditions: \_\_\_\_\_  
(continue on back if necessary)

In case of emergency, contact: \_\_\_\_\_

Phone: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

**T-Shirt size: Youth - XS -(4-5) S (6-8) M (10-12) L (14-16)**

**or Adult - S M L XL - please circle one**

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**A \$10.00 donation per child is appreciated. Thank you!**



Please cut here and return form to Jessica Hickman or the church office.