

## Beautiful Savior Lutheran Church VBS Registration 6-8:00 p.m. June 4-8, 2023

Child's Name			Child's Gender	
Child's Age	Date of Birth	Last school grade completed		
Name of parent	t(s)			
Street Address	:			
City:		State:	Zip:	
Home telephon	ne: ()			
Parent/caregiv	er's cell phone: () _			
Home e-mail ad	ddress:			
Home church:				
Youth Shirt Siz	e 2/4 6/8 10/12 14/1	6 Adult Shirt Size	e: S M L	XL
Crew number o	or name (for church use only	):		
	Allergies or Other N	Medical Conditions:		
	In case of emergen	cy, contact:		
	Phone:			
	Relatio	nship to child:		
May we use pic	ctures of your child on BSLC	social media, websit	e and publications?	
Yes □ No □				