

**Vacation Bible School Registration Form 2021**

**Scobey Lutheran Church**

**Dates: August 9 – 13, 2021**

**Ages 5 - 12**

**NAME:** \_\_\_\_\_ **AGE:** \_\_\_\_\_

**PARENTS:** \_\_\_\_\_

**PHONE NO.** \_\_\_\_\_ **ADDRESS** \_\_\_\_\_

**SESSION I WISH TO ATTEND: MORNING** \_\_\_\_\_ **AFTERNOON** \_\_\_\_\_

**CONCERNS FOR YOUR CHILD: Medications, Allergies, Other,**

**COST: Free Will Offering**

**EMERGENCY CONTACT:** \_\_\_\_\_

**MY CHILD CAN BE RELEASED TO:** \_\_\_\_\_

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