



# VBS 2008 Registration Form



Adult or Family Name: \_\_\_\_\_

Child's Name

Age

Last grade completed

T-shirt size

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Address: \_\_\_\_\_

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E-mail Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell phone or other emergency contact: \_\_\_\_\_

Home Church \_\_\_\_\_

Additional information: (allergies/medical information/dismissal and pickup information/other)

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Mail this form to Riverside Presbyterian Church, 3400 N Atlantic Ave., Cocoa Beach, FL 32931.