

9am-noon (complete one form per child)

REGISTRATION FORM

\$25 per child

Make Check payable to Ivy Chapel with "VBS" on the memo line.

Return or Mail to: Ivy Chapel – VBS 620 North Woods Mill Road Chesterfield, MO 63017

Registration deadline Sunday July 1st For questions call 314-434-4991

Child's Name	: 	Age:	
Street address:			
		Zip:	
Home telephon	e: ()		
Cell telephone:	()		
E-mail address:	: 		
		Last school grade completed:	
Home Church:			
		Phone:	
Father:		Phone:	
In case of em	ergency, contac	ct:	
Name:		Phone:	
		Phone:	
Allergies or o	ther medical co	nditions:	
Dismissal Info	ormation (Provide	e name(s) of person(s) allowed to pick up child other than parents):	
Name:			
We will be	making a VBS T	T-Shirt for our craft on Monday. Please provide us	
	wit	th your child's T-shirt size!	
T-shirt size	Youth Size	XS S M L	