

VBS REGISTRATION FORM
Operation Arctic
July 10-14, 2017 6:00-8:30 p.m.
Dinner provided beginning at 5:00 p.m.

Name: _____ Date of Birth: _____

Grade just finished in school (if applicable): _____

T-Shirt size: (please circle one)

Child:	Small 6/8	Medium 10/12	Large 14/16
Adult:	Small	Medium	Large X-Large

Name: _____ Date of Birth: _____

Grade just finished in school (if applicable): _____

T-Shirt size: (please circle one)

Child:	Small 6/8	Medium 10/12	Large 14/16
Adult:	Small	Medium	Large X-Large

Name: _____ Date of Birth: _____

Grade just finished in school (if applicable): _____

T-Shirt size: (please circle one)

Child:	Small 6/8	Medium 10/12	Large 14/16
Adult:	Small	Medium	Large X-Large

Parent's Name: _____ Phone : _____

Address: _____

Emergency Phone# _____

If your child has any special needs, please let us know. Thanks!

Send completed form to:

St. John's Lutheran Church 6483 W 580 N Otwell, IN 47564
812-482-7623 or email to stjohnsboonetwp@gmail.com