

BACBC San Leandro 2017 Vacation Bible School (August 7 to 11)
Registration Form
(One form per child)

CHILD'S INFORMATION			
Last Name:		First Name:	
Birth date: MM/DD/YY	Grade (Fall 2017):		Sex: <input type="checkbox"/> M <input type="checkbox"/> F
Street Address:			
City:		Zip Code:	
E-mail Address:			
Home Phone: ()		Other Phone: ()	
School:		Home Church (if any):	
Child's T-Shirt Size: <input type="checkbox"/> Youth Small (6-8) <input type="checkbox"/> Youth Medium (10-12) <input type="checkbox"/> Youth Large (14-16) <input type="checkbox"/> Other (Adult S, M, L, XL) _____			

EMERGENCY CONTACT INFORMATION	
Person to contact in the event of an emergency:	
Name:	Relationship:
Phone Number: ()	Other Phone: ()
Medical Insurance Name:	
Policy/Group Number:	
Any Special Considerations:	

AUTHORIZATION FOR MINOR CHILD RELEASE AT THE END OF THE DAY	
The following people are authorized to pick up my child (They may be called in case of emergency if parent cannot be reached) Don't forget to include ALL people that might be picking up your child (including parents/guardians):	
Name:	Relationship:
Home Phone: ()	Other Phone: ()
Name:	Relationship:
Home Phone: ()	Other Phone: ()
Name:	Relationship:
Home Phone: ()	Other Phone: ()
Name:	Relationship:
Home Phone: ()	Other Phone: ()
Name:	Relationship:
Home Phone: ()	Other Phone: ()
<input type="checkbox"/> My child will arrive and depart classes on his/her own capabilities (walking, bicycle, etc) (Check box if yes)	

I authorize those in charge of VBS to act on my behalf in their best judgment in the case of any emergency requiring medical attention.

Parent/Guardian Name (Printed):

Date:

Parent/Guardian Name Signature:

Please attach payment of \$25 (make check out to "BACBC") along with this registration form. Confirmation of registration will be made by mail after July 1, 2017. Wait-list notifications will be called ASAP.

Mail to: Pastor Patrick Chow, BACBC, 1600 Harbor Bay Pkwy, Suite 100, Alameda, CA 94502

For Office Use Only

Date Received _____ Cash _____ Check _____ Received by _____

For Office Use Only

Date Received _____ Cash _____ Check _____ Received by _____