

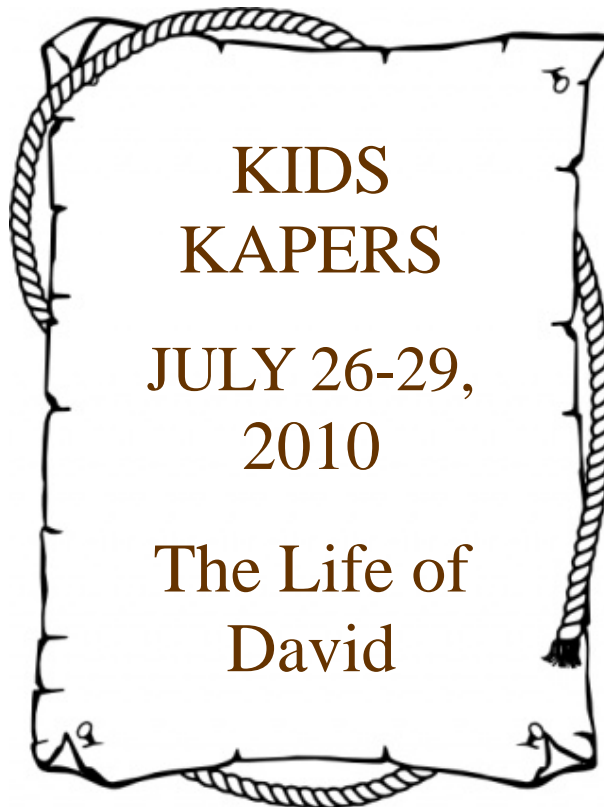


Glen Elm  
Church of Christ

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YOUTH MINISTER: Blair Roberts  
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KIDS  
KAPERS

JULY 26-29,  
2010

The Life of  
David

*The Life  
of  
David*

July 26—29, 2010

Glen Elm  
Church of Christ



## Registration Form

Name: \_\_\_\_\_

Gender: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Birthday: \_\_\_\_\_  
(mm/dd/yy)

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

Parents Names: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Hospitalization Number: \_\_\_\_\_

Allergies: \_\_\_\_\_

Medical Conditions: \_\_\_\_\_

Special Needs: \_\_\_\_\_

Comments: \_\_\_\_\_

Is your child okay to walk home afterwards without being picked up? \_\_\_\_\_

For the safety of your child, please list the people who are allowed to pick your child up after VBS is finished each day.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

If there is anyone who you do not want picking up your children, please name them here:

Parent's Signature: \_\_\_\_\_

