

St. Rose Vacation Bible School

June 26 – June 30th, 2016 8:45 am -12:30 pm



Registration FORM - CHILD Participant

Register and Pay On-Line (Paypal) www.strosebelmar.com

Or send this form w/check or cash to Parish Office

Registration is limited to first 60---Register early!!! Deadline for Registration: June 20th

Children entering 1st - 5th Grade in September 2017

Parent/Guardian Name: _____ Email _____

Address _____ City _____ Zip _____

Primary Contact # _____ Cell: _____

Emergency Contact & Phone _____

Registration Fee: \$50.00 per child & \$30.00 for each additional child.

Enter Children's names on back

Person responsible for picking up child at the end of each VBS day:

Name _____ Phone _____

I consent to the use of any videotapes and/or photographs in which my child may appear by the Diocese of Trenton and/or the parish (without names). I understand that these materials are being used for promotion of the parish Religious Education programs and/or activities, which may include recruitment and fundraising efforts.

Parent/Guardian Signature: _____ Date: _____

All Week- ADULT VOLUNTEERS as Station Leaders: **\$30.00 DISCOUNT**

(Youth volunteers sign-up online) Station Leader : ___Snack time ___Outdoor Games ___
“ Experiment Gizmos” on Bible Theme (Lesson and script provided) ___Video and Discussion
___Tech –Computer and Photo wizard ___Director: Opening and Closing Skits ___Aide or
Hall Monitor

Volunteer 's Name: _____ Phone Contact: _____

Other part-time volunteers: ___Secretarial ___Set-up ___Decorating

Child/ren Registration 

Vacation Bible School 2017

PLEASE CONTRIBUTE.....

Last Names beginning with: **A-L** Gallon jug of water

M-Z Bag of Goldfish crackers or pretzels or animal crackers

1. Participant's Name _____ M/F

Parish _____ School _____

Grade Entering in Sept.2017 _____ Birth Date _____

Allergies/Special Needs: _____

2. Participant's Name _____ M/F

Parish _____ School _____

Grade Entering in Sept.2017 _____ Birth Date _____

Allergies/Special Needs: _____

3. Participant's Name _____ M/F

Parish _____ **School** _____

Grade Entering in Sept.2017 _____ **Birth Date** _____

Allergies/Special Needs: _____
