
"BEACH PARTY"
Middleton United Church
Vacation Bible School
(July 21-25, 2008)

Please return to:
Claire Castle, Secretary
Middleton United Church
Box 39, Middle Musquodoboit
NS B0N 1X0

Registration Form
~ One form per child please ~

Name _____ Grade Completed _____ Birthday _____ Age _____
Address: _____
Home Phone _____ Alt. Phone _____

Emergency contact person _____
Relationship to student _____
Home Phone _____ Alt. Phone _____

Food allergies or other medical problems _____
Family doctor _____ Physician Phone _____
MSI # _____

Siblings attending VBS (names and ages) _____
Church affiliation _____
Church membership at _____
Brought by * _____

*** Specific written permission must
be given for a child to be picked up
by an alternate person.**

Attendance: Day 1 2 3 4 5 Registration: \$10. per child PD ____

Permission Slip for Emergency Medical Treatment

I, _____ give permission to the staff of the Vacation Bible School to seek emergency medical treatment for my child, _____, should it be necessary.

Signed _____ Dated _____