



Come join us!

Good Friday VBS



Where: Acton Congregational Church

Date: Friday, April 2, 2010

Time: 9:00 am - 12:00

Cost: Free!

Sing!

Bake Bread!

Take a journey through holy week!

Make crafts!

REGISTRATION FORM

Family Last Name: _____

Child's name _____ grade K 1 2 3 4 5 T-shirt size ____ allergies? Y/N _____

Child's name _____ grade K 1 2 3 4 5 T-shirt size ____ allergies? Y/N _____

Child's name _____ grade K 1 2 3 4 5 T-shirt size ____ allergies? Y/N _____

Parent name _____ Contact phone # _____

Address _____

Emergency contact name/ phone number : _____

(Please circle one)

I give permission for my child to be photographed for the purpose of promoting this event. **Yes / No**

I authorize the VBS coordinators to seek medical treatment and/or arrange for transportation to Emerson Hospital in case of emergency. **Yes / No**

Donation: \$ _____ or **supplies** (we will contact you about a specific need) or **no, thanks.**

Parent's signature: _____ Date : _____

Please return all registration forms to:

Acton Congregational Church
Attn: Merrill Noble
12 Concord Road
Acton, MA 01720

Questions?
Contact: Deb Henderlong
Deborahgh@verizon.net