

**Pre - Registration for
Gadget's Garage
Vacation Bible School**

**July 6 – 10, 2009
6:00 PM – 8:00 PM**



One form per child, please.

Child's name _____

Grade Completed _____

Birthday _____ Age _____

Parents' names _____

Home address _____

Home phone _____

Alternate phone _____

Emergency contact person _____

Relationship to student _____

Home phone _____

Alternate phone _____

Food allergies Y N List:

Medical concerns Y N List:

Family doctor _____

Doctor's phone _____

Siblings attending VBS (names and ages):

Church affiliation: _____

Church membership at _____

People who may pick up the child:

VBS leaders have permission to photograph/film the minor (s) designated above in any manner or form for any lawful purpose associated with this VBS program.

Parent's signature: _____

Date: _____

**Lutheran Church of the Good Shepherd and
Good Shepherd Lutheran School
2101 Lor Ray Drive, North Mankato, MN • 507.388.4336**