



VBS Registration Form

First Presbyterian Church of Tequesta
(please fill out one form per child)

Session 1: Mon, July 8 – Thurs, July 11, 2024 9:00am – Noon

Ages: 3 years – 5th Grade

Session 2: Mon, July 15 -18, 2024 9:00am – Noon

Ages: 3 & 4 years ONLY

Cost: \$40 Cash or Check to FPCT

If you have questions or concerns, please contact our Family Ministries Director,
Crystal Botha @561-746-5161 ext 105 crystal@tequestapres.org

Enrolling for Session 1: _____ **Session 2:** _____

Child's name _____

Child's age _____ Date of birth _____

Last school grade completed _____ T-shirt size Child XS__ S__ M__ L__

Name of parents _____

Street address _____

City _____ State _____ ZIP _____

Home telephone (____) _____

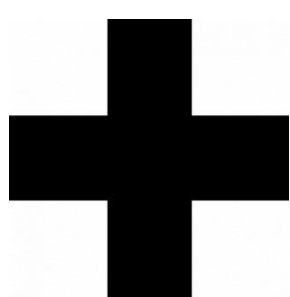
Parent/caregiver's cellphone (____) _____

Home email address _____

Home church _____

Would you like to volunteer? Yes! _____ No, thanks _____

If you answered yes, how would you like to help? _____



Allergies or other medical conditions

Emergency contact

Phone _____ Relationship to child _____

People authorized to pick up your child _____

Insurance information

Company _____ Policy # _____

Group # _____ Name of policy holder _____

Photo release (please initial below)

____ Yes, I give permission for my child's photographic or video image to be used for promotional materials in print publications, website content, and social media.

____ No, I do not give my consent for the above.

This section is for church use only.

Date received _____ Paid Cash or check # _____ Confirmation _____