**Woodbridge Community Church**

5000 Barranca Parkway, Irvine CA 92504

Phone: 949-552-1101

email@woodbridgechurch.org

**VBS 2016 Registration Form**

**Parent/Guardian Information (Please Print)**

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Children Information**

**1st Child’s Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Birthdate \_\_\_\_\_\_\_Last school grade completed\_\_\_\_\_\_\_\_\_\_\_

Special Needs of Child (learning disability, medications, etc.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Food Allergies \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Size of Child’s shirt S \_\_ M \_\_\_\_ L \_\_\_\_ XL \_\_\_\_\_

**2nd Child’s Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Birthdate \_\_\_\_\_\_\_Last school grade completed\_\_\_\_\_\_\_\_\_\_

Special Needs of Child (learning disability, medications, etc.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Food Allergies \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Size of Child’s shirt S \_\_ M \_\_\_\_ L \_\_\_\_ XL \_\_\_\_\_

**Child’s Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Birthdate \_\_\_\_\_\_\_Last school grade completed\_\_\_\_\_\_\_\_\_

Special Needs of Child (learning disability, medications, etc.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Food Allergies \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Size of Child’s shirt S \_\_ M \_\_\_\_ L \_\_\_\_ XL \_\_\_\_\_

**Payment Information**: Complete Registration form & Release Form. Make checks payable to Woodbridge Community Church. Early Registration: $50 per child/$100 per family. Late Registration starting June 13th: $60per child/$120 per family.

**Parent or Guardian. Please check:**

\_\_\_\_\_\_I would like to receive a scholarship. (First come first serve basis only) Please circle needed. 50%

\_\_\_\_\_\_I would like to donate to the scholarship fund. Donated \_\_\_\_\_\_

\_\_\_\_\_\_I would like to attend the VBS Celebration on Sunday, June 26.

**Office use only:**

Date Received \_\_\_\_\_\_\_\_ Email Confirmation \_\_\_\_\_\_\_\_\_ Release Form\_\_\_\_\_ Amount \_\_\_\_\_ (check/cash) Crew \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_