

LAKWOOD BAPTIST CHURCH GOD'S MASTERPIECE VBS REGISTRATION FORM

Name: _____

*Birthdate: _____ (Helps us determine age eligibility for future events when sending out promotional Postcards)

Address: _____

Phone: _____

Parent(s) Name: _____

In Case of Emergency, Contact: _____

Allergies or other Medical Conditions: _____

School Grade Just Completed: _____

I hereby: _____ Grant _____ Do not Grant permission for Lakewood Baptist Church to use pictures of my child on it's website for informational or promotional purposes.

Parent/Legal Guardian (print name)

Parent/Legal Guardian (signature)