

Bally Mennonite Church

2022 Vacation Bible School and Lunch Registration Form

P.O. Box 109, 1481 Route 100

Bally, PA 19503

610-845-7780 www.ballymc.org

Please complete a separate form for each child participating in VBS. Mail back to or drop off at BMC to be registered. DEADLINE IS JULY 9, 2022.

Child's Name:	Date of Birth:
Grade Completed:	Age:
Parent/Guardian:	
Home Address:	
City/State/Zip:	
E-Mail Address:	
Phone Number for Parent/Guardian while Child is in VBS:	
Home Church:	
Emergency Contact:	
Relation to Child:	
Emergency Contact Number:	

Yes! We plan to stay for lunch # of kids_____ # of adults_____

No, we are unable to stay for lunch

Please list any known allergies/medical conditions/prescription medications or physical restrictions that VBS staff should be aware of:

In the event of illness, injury or other emergency involving my child, I understand that every effort will be made to contact me. If time is of the essence, I/We the undersigned, parent(s)/legal guardian(s) of _____, a MINOR, do hereby authorize the church leaders (including VBS Leaders or Pastor) to consent to any medical treatment at a hospital or other health care provider which is deemed appropriate under the circumstances by such church leader.

I/We _____ the parent(s)/legal guardians(s) of the above named child, hereby give my/our consent to child participation in Bally Mennonite's Vacation Bible School.
