

**Vacation Church School
Registration Form**

July 20th-24th, 2009
9:00 am-12:00 noon

*We will discover
reptiles and
amphibians!*



“So be wise as
serpents...”
Matthew 10:16

**First Parish
Congregational Church
United Church of Christ**
PO Box 114
47 East Derry Road
East Derry, NH 03041
Tel. 603-434-0628
Fax: 603-437-3001
E-Mail: www.fpc-ucc.org

Early Registration \$8 per child *if* application is received by July 13th.
After July 13th, cost will be \$10.00 per child.

Child's Full Name _____ DOB _____
Age as of September 30, 2009 _____ **Grade** as of September 30, 2009 _____
Parents or Guardians Names (PLEASE PRINT) _____
Street _____
City/State/Zip _____
Tel. # _____ Cell # _____

May we use a group or individual photo of your child on our church website? Yes ___ No ___
May we use a group or individual photo of your child in the Newsletter? Yes ___ No ___
(Only the title & date of the event would be printed, no personal info on the child would be given.)

Dismissal Information:

Who is authorized to pick up your child? _____ Tel. _____
Is there someone you **DO NOT** want to pick up your child? _____

Medical Information:

Name and telephone number to call in the event of an emergency, if no parent/guardian can be reached. I understand every effort will be made to contact me first.

Name _____ Tel. # _____

Allergies: _____

Doctor's Name _____ Doctor's Tel. _____
(Name of Child) _____ has my permission to be treated by a doctor or hospital staff in the event of an emergency, if no parent or guardian can be reached. I understand every effort will be made to contact me first.

Parent/Guardian Signature _____ Date _____

For office use only:
Pmt received: Cash Amt Received _____ Check # _____ Dollar Amt of Check _____