

**First Congregational Church
Summer Program Registration Form, 2017**

Student's Name: _____

Completed Grade: _____ Age: _____

Parent's Name: _____

Parent's Telephone Contact During Program: _____ Home: _____

Parent's Email: _____

Known Allergies: _____

Dietary Restrictions: _____

Church Membership: _____

I would like to register for:

_____ Musical, completed grades 1 – 8 June 19 – 22, 2017
9:00 AM – 12:00 Noon

_____ Vacation Bible School, age 3 – completed grade 5 July 31 – August 3, 2017
9:00 – 11:30 AM

My child does not need transportation: _____

I would like to request transportation:

My child needs transportation to and from church from Kids' Club for the musical: _____

My child needs transportation to and from church from Kids' Club for VBS: _____

I give permission for a driver from First Congregational Church to transport my child,
_____, to and from First Congregational Church for musical rehearsals and/or VBS.
The driver will pick up and return my child to Kids' Club at River Falls High School. I understand it is
my responsibility to notify Kids' Club of this transportation arrangement. I will notify the church
office if my child will be absent.

Parent's Signature

Date