

TANNER CHAPEL AFRICAN METHODIST EPISCOPAL CHURCH

Vacation Bible School 2017 Registration Form

MONDAY, JUNE 5, 2017 – FRIDAY, JUNE 9, 2017



Please complete one (1) VBS registration form per CHILD/ADULT.

REGISTRATION FORMS MAY BE RETURNED VIA:

E-MAIL: tannerchapel@tannerchapel.org | FAX: 602.253.4079

MAIL | HAND-DELIVER: 700 East Jefferson Street, #300 | Phoenix, AZ 85034

SUNDAY DROP OFF: VBS Registration Table on the following Sundays
May 14th, May 21st, May 28th

Participant Name: *(Please complete one VBS registration form per CHILD/ADULT)*

FOR CHILDREN ONLY

Age: _____ Grade: _____

FOR TANNER MEMBERS ONLY

Address Update: Y N

Address:

Daytime Phone:

Evening Phone:

Name of Parent or Guardian:

Address: _____

Emergency Contact Name:

Emergency Contact Phone:

List any special needs, such as allergies (including food allergies or prescription allergies), medical conditions, etc.:

Dinner: Y N

I, _____ (Parent/Guardian), do hereby authorize **EMERGENCY MEDICAL TREATMENT** to be given by any recognized medical facility administering **EMERGENCY TREATMENT** to _____ (Child's name) in the event that I cannot be reached at the time of the injury or accident. It is understood that the expense will be my responsibility.

Signature of Parent or Guardian

Date