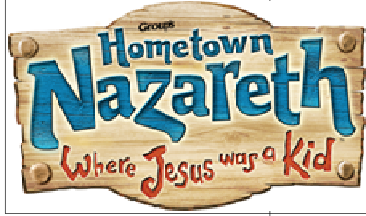


# SUMMER 2011 REGISTRATION FORM

Preregistration is required for VBC 2011. Return completed forms to the church mailbox or STAR Kids Info Window on lower level.



August 8 - 12, 2011: 9 am—12:00 pm  
For Kids entering JK—Grade 5  
Cost: \$15.00 per family (pay by cash or cheque ONLY).

**SPACE IS LIMITED!**

Deadline for Registration is when full capacity is reached or June 30th.



## ONE FORM PER PARTICIPANT

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade in Sept.: \_\_\_\_\_

Address: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Health Card Number: \_\_\_\_\_

Home church (if you attend): \_\_\_\_\_

Allergies/Medical Info: \_\_\_\_\_

### Contact person in case of Emergency:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_ (home) \_\_\_\_\_ (work/cell)

### Permission Form

I, \_\_\_\_\_ give my son/daughter \_\_\_\_\_ (child's name) permission to participate in the West Highland Baptist Church VBC 2011. I will not hold West Highland Baptist Church or leaders responsible for the consequences of IRRESPONSIBLE behaviour on the part of my child. I give the West Highland leaders permission to obtain any necessary medical attention for \_\_\_\_\_ (child's name), understanding that they will first try to contact me.

*Submission of this application will also serve as permission given for my child's photographs to be taken and used by the church.*

Parent's or Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Date Form Received:	
Received By:	
Payment Received:	

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**Office:** Suite 205, 393 Rymal Rd, W, Hamilton, ON L9B 1V2

**Ph:** 905 387-5385 **Fx:** 905 387-1685

**Email:** [starkids@westhighland.org](mailto:starkids@westhighland.org) **Website:** [www.westhighland.org](http://www.westhighland.org)

**Director of Children's Ministry:** Suzanne Kirsch