



Registration Form

Serengeti Trek Vacation Bible School

July 7 – July 11, 2014

9 a.m. - noon

Please complete and mail along with registration payment to: First Congregational Church of Haddam, P.O. Box 215, Haddam, CT 06438.

Child Name: _____ Age: _____ Grade entering in the fall: _____

Allergies or other medical conditions: _____

Child Name: _____ Age: _____ Grade entering in the fall: _____

Allergies or other medical conditions: _____

Child Name: _____ Age: _____ Grade entering in the fall: _____

Allergies or other medical conditions: _____

Parent Information:

Name: _____

Address: _____

Phone where you can be reached during this event: _____

Email address: _____

Emergency contact if parent can not be reached: _____

Emergency contact number: _____

May we photograph your child as part of this event and post these photos in the church's Fellowship Hall, in the church's monthly newsletter, and on the church website? No names will be included. Yes No

Comments: _____

Signature of parent/guardian _____ Date _____

Registration Fees:

\$20 per child (\$40 maximum per family)

Checks can be made out to: FCCH (Please write "VBS" in memo line)