

2012 VACATION BIBLE SCHOOL

Olivet Presbyterian Church
1001 Washington Avenue ~ Prospect Park, PA 19076
(610) 534-2270

The Sky's the Limit!



Monday, June 18th through Thursday, June 21st
6:15 pm to 8:30 pm
Closing Program: Friday, June 22nd ~ 7 pm
Ages 4 years* through 6th Grade

At Sky, faith and imagination soar as kids discover that everything is possible with God. Kids participate in memorable Bible-learning activities, sing catchy songs, play teamwork-building games, dig into yummy treats and experience electrifying Bible adventures. Plus, kids will learn to look for evidence of God all around them through something called God Sightings.

PRE-REGISTRATION IS APPRECIATED & ENCOURAGED!
(Each class size is limited to first 20 kids who register)

**Please fill out the back of this form and
return it to the Church Office as soon as possible**

**must be 4 years old by June 17th*

Olivet Presbyterian Church 2012 VACATION BIBLE SCHOOL REGISTRATION FORM

Child's Name: _____ Birthdate: _____ Grade completed in June: _____
 Address: _____
 Phone: _____ Email: _____ Church Association: _____
 Mother's Name: _____ cell phone: _____
 Father's Name: _____ cell phone: _____
 Emergency Name: _____ Phone #: _____ Relationship to Emergency #: _____
 Child's allergy / limitation: _____
 Medications: _____

We look forward to accepting all age appropriate children into our program; however, if your child has special needs, we may require that you shadow him/her through the program. Unfortunately, we do not have enough staff to address individual special needs.

If I, or the above named emergency contact person, cannot be reached in an emergency, I hereby authorize Bible School staff members to act in my behalf for any emergency medical treatment needed for my child until I am present.

Signature of Parent/Guardian _____ Date _____
 Siblings who will also be attending VBC (Names & Grade): _____

I give permission for my child / children to be photographed for the church's website. (No names will be used on the website.)

Signature of Parent/Guardian _____ Date _____