Sonshine Safari Camp

Preschool VBS Registration

Child's Name _____

Date of Birth _____   Age _____

Parents Name _____

Address _____

Primary Phone Number _____   Email _____

Emergency Contact _____

Emergency Phone Number _____

Person Responsible for Picking Up After VBS _____

Relation to Child _____   Phone Number _____

T Shirt Size _____

Do you give permission for your child to be photographed during VBS events? _____