

St. James Episcopal Church
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Springfield, MO 65804
417-881-3073
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www.sj.church



Child Registration Form

Director Contact: Kimby Tharakan, 479-747-3757 or stjamesspringfield@gmail.com

(Please Print)

Child's Name _____

Child's Age _____

Child's birthday _____

Child's Grade _____

Parent/Guardian Name(s) _____

Mobile Phone _____

Home/Work Phone _____

Can we text you? _____

Email _____ Preferred Contact _____

Allergies _____

Special Needs _____

Emergency Information

Emergency Contact 1 _____ Phone _____

Emergency Contact 2 _____ Phone _____

Doctor's Name _____ Phone _____

Dismissal

Who can pick up your child from VBS?

Name _____ Relationship _____

Name _____ Relationship _____

Parent/ Guardian Signature _____ Date _____