

Last Name _____

VACATION BIBLE SCHOOL REGISTRATION FORM 2018

IMMACULATE CONCEPTION CHURCH
316 Old Allerton Road Annandale, New Jersey 08801

Vacation Bible School Program:
“SHIPWRECKED: Rescued by Jesus”

July 30th to August 3rd, 9 am to 12 pm
Location: Parish Hall of the Church

Tuition is \$60.00 for the first child and \$40 for subsequent children payable at time of registration. Registration with credit card payment is available online for an additional \$5 fee at www.iccannandale.org

Go to “education and youth”; then on left box “Vacation Bible School”; then “VBS Registration 18”

Registration Forms can be dropped off or mailed to the Religious Education Office but the program is being run by Karen Mahaney. For questions email: mahaney5@yahoo.com or call 908-735-0494

Parents’ Names (first & last): _____
Street City/zip

Address: _____

Phone: Home _____ Cell _____

Father’s Business Phone _____ Mother’s Business Phone _____

Email address _____

Is it okay to photograph your child? Y/N comments: _____

Children’s Names

Grade K-5 (Fall 2018)

____ I am willing to help during the week as a parent volunteer/station leader

Does your child have any special needs, medical condition or allergies? _____

Does he/she carry an EpiPen? _____ If so, additional medical form is required.

Does your child have any special learning needs? _____

This information will be shared with the group leaders only and it will not marginalize your child in any way, but will help the group leaders address your child’s needs. Our programs are run by volunteers, so we will do our best to accommodate your child’s needs.

For office use only:

Date received : _____

Paid _____ Check # _____ Online Payment _____