



Traveler Registration Form

Student(s) Name(s) _____

Parent/Family/Guardian Name _____

Address _____

E-mail Address _____

Phone Numbers: Home _____ Cell _____ Work _____

Date of birth _____ Age(s) _____ Last school grade(s) completed _____

Home Church (if any) _____

Friends of your child at this church _____

Special Needs/Allergies/Medical Information/Other: _____

Emergency Contacts

Name _____ Phone _____

Name _____ Phone _____

Name(s) of person(s) who may pick up this child from VBS _____

Photo Release: _____ Church/VBS has my permission to use my child's photograph publicly in VBS materials. I understand the images may be used in print publications, online publications, presentations, websites, and social media. I also understand that no royalty, fee or other compensation shall become payable to me by reason of such use.

Parent/Guardian's signature: _____

Date _____

----- (for church use only) -----

Assigned to Traveler Group: _____



Select your child/children's T-shirt sizes below:

Youth: ☐ X-Small
☐ Small
☐ Medium
☐ Large
☐ X-Large

Adult: ☐ Small
☐ Medium
☐ Large