

Student's Name

## **REGISTRATION ENDS JUNE 12, 2023**

## St Joseph's Parish June 19th-23rd Food Truck Party





Parent/Family/Guardian Name		
Address		
E-mail Address		
Phone Numbers: Home	Cell	Work
Date of birth Age	Last school grade completed	
Home Church (if any)		****
Friends of your child at this church		
Special Needs/Allergies/Medical Information/Other:		
Emergency Contacts		
Name	Ph	one
Name	Ph	none
Name(s) of person(s) who may pick up this child from VE	SS	
	ø	
Photo Release:	mages may be used i	in print publications, online publications,
Parent/Guardian's signature:		Date
(for church use only)		
Assigned to Group:		
Are family members helping with VBS? If yes, where?		