

# St. William's Catholic Church 2019 VBS Registration

2300 Frederica Rd St. Simons Island, GA 31522  
(912) 638-2651 - [PowerNancy@comcast.net](mailto:PowerNancy@comcast.net)

Grade in fall (Circle): **K, 1, 2, 3, 4, 5**

Student Name: (Full) \_\_\_\_\_ Age: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Main Phone: ( ) \_\_\_\_\_ Family e-mail: \_\_\_\_\_

Mother's Full Name (Maiden): \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_

Father's Full Name: \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_

Siblings: (Names/Ages) \_\_\_\_\_ School Attends: \_\_\_\_\_

SPECIAL CONCERNS – **ALLERGIES**, educational, dietary, health, social, etc.: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Cell ( ) \_\_\_\_\_

ALL - Photo release:

By marking YES you DO give permission for your child (ren)'s image and name to be used.

By marking NO you DO NOT give permission **YES** \_\_\_\_\_ **NO** \_\_\_\_\_

**Fee per child is \$15.**

Registered/PAID - AMOUNT: \$ \_\_\_\_\_ Cash: \_\_\_\_\_ Ck # \_\_\_\_\_ - \_\_\_\_\_ Date: / /