



St. Thomas Mar Thoma Church

Auckland, New Zealand

VBS 2009 Registration Form

VBS 2009 Registration Form			
Name			
Age		DOB	
School		Year Level	
Parents			
Father/Tel			
Mother/Tel			
Email			
Address			
Home Church			
Emergency Contact/Tel			
Are you willing to help?	Y/N		
How did you hear about VBS 09?			
Did you participate in VBS 08?			
Parental Consent			
Signature			
Office Use			



Health Form

Does your child have any allergies or Medical conditions?

Any Dietary Restrictions?

Any other information we need to know?



Please submit all forms by 20th June