

**Alamo United Methodist Church**

**4071 N. Foster Rd.**

**210-661-6265**

**Vacation Bible School**

**Saturday**

**July 20, 2019**

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|  | **2019 VBS Registration**  **Saturday, July 20, 2019**  **8:00 AM – 3:30 PM** |
| **Name** |  |
| **Birthdate** |  |
| **Address** |  |
| **City, State, ZIP** |  |
| **Primary Phone** |  |
| **Cell Phone** |  |
| **Parent(s), Legal Guardian** |  |
| **Emergency Contact** |  |
| **Allergies or other Medical conditions** |  |
| **School Grade Just completed** |  |
| **Photo Permission** | **Yes No (Please circle one)** |
| **Do you have a home Church?** |  |
| **Parents Signature** |  |

**Please Note: You may fill out this form and email the completed form to** [**secretary@alamoumc.com**](mailto:secretary@alamoumc.com) **or stop by the church office Monday - Thursday, 9:00 am to 2:00 pm to register in person.**