

Sacred Heart Parish
Vacation Bible School
Registration Form
M-F August 22nd-26th

Child's Name: _____

Age: _____ Grade Entering: _____

Parent/Guardian Name: _____

Cell Phone #: _____

Health Concerns?/Allergies?: _____

Second Child: _____

Age: _____ Grade Entering: _____

Health Concerns?/Allergies?: _____

Third Child: _____

Age: _____ Grade Entering: _____

Health Concerns?/Allergies?: _____

\$50 1st child, \$40 2nd child, \$30 3rd child, 4th FREE

Tell a Friend, Neighbor, Relative!!

Any questions? Contact Gina Cook (845)541-4216

or Sacred Heart School (845)561-1433