



## Together in Christ Collaborative VBS 2025 Registration Form

Please return this form to Matt Brady by email at  
directorofministries.tic@gmail.com. Thank you!

---

### **Child 1 Information:**

Name:

Date of Birth:

T-Shirt Size:

Grade Entering:

Allergies:

Other Things We Should Know:

---

### **Child 2 Information:**

Name:

Date of Birth:

T-Shirt Size:

Grade Entering:

Allergies:

Other Things We Should Know:

---

### **Child 3 Information:**

Name:

Date of Birth:

T-Shirt Size:

Grade Entering:

Allergies:

Other Things We Should Know:

---

**Family Contacts**

Mom:

Phone:

Dad:

Phone:

Emergency Contact:

Phone:

Relationship:

Home Address:

---

**Photography Permission**

We may take pictures to be used only in official Together in Christ Collaborative publications, such as the bulletin and marking for VBS in future years. Do we have permission for your child to feature in these photos?

Yes \_\_\_\_ No \_\_\_\_

---

**Parent Signature**

---

**Date**