



# Orion Community Vacation Bible School

July 15-19, 2019 9 am - noon  
at the Orion United Methodist Church  
407 12th Avenue, Orion, IL 61273



For children age 4 by September 1, 2019 through those who are entering 6th grade in the fall.

\$5 per child by May 31, 2019, \$10 after that date & prior to VBS, and \$20 on the first day of VBS.

Completed registration forms with enclosed payment (checks should be made payable to Orion Community VBS) must be mailed or brought to the Orion United Methodist Church, Orion Community VBS, PO Box 176, Orion, IL 61273

If you would like to order this year's VBS music CD or DVD, please enclose your payment of \$10 for a CD or \$15 for a DVD with your registration form and payment. All CD and DVD orders must be turned in by May 31, 2019.

If your child has an allergy that is food-related, an adult must stop by the registration table before 9 AM on Monday, July 15 to review the snacks for the week. If necessary, parents should provide any alternative snacks needed for their child the week of VBS.

For more information regarding registration, call Tara Miller at 738.5583 or Autumn Manning at 738.6515

## Orion Community Vacation Bible School Registration Form

Please complete **one form per child** and return with payment to Orion United Methodist Church, Orion Community VBS, PO Box 176, Orion, IL 61273

Name of child \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

Date of birth \_\_\_\_\_ School grade entering 2019-2020 \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name of parent(s) \_\_\_\_\_ Home phone \_\_\_\_\_

Cell phone \_\_\_\_\_ Email address \_\_\_\_\_

Home Church \_\_\_\_\_

In case of Emergency: Contact Person \_\_\_\_\_ Phone number \_\_\_\_\_

Relation to child \_\_\_\_\_

Allergies or other medical conditions? Yes No

If yes, explain \_\_\_\_\_

*(If the allergy is food related, an adult must stop by the registration table before 9 AM on Monday, July 15 to review snacks for the week. If necessary, parents should provide any alternative snacks needed for their child the week of VBS.)*

I have ordered and paid for \_\_\_\_\_ CD's (\$10 each) and/or \_\_\_\_\_ DVD's (\$15 each)

Amount remitted (please note the deadline dates at the top of this sheet): \_\_\_\_\_

I give my permission for my child to be photographed during VBS for a photo CD or publicity. Yes No

I am willing to help out Yes No