




Help us make this VBS a special one for your child by volunteering during the week.

Parent participation in our Vacation Bible School is essential to running a meaningful VBS.

You are appreciated!

Vacation Bible School 2008



 <p>KNOX Come Connect to Christ</p>	<p><i>Our Mission:</i> To LEARN, GROW and SERVE as followers of Jesus Christ</p>
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Knox Presbyterian Church (PCUSA)
1105 Catalpa Lane, Naperville, IL 60540
Phone (630) 355-8181, Fax (630) 355-8194

www.knoxpres.org

Vacation Bible School Registration 2008

Knox VBS



Now available to more age groups!!

Dates: June 16 ~ June 20

Time: 9:00 a.m. to 11:30 a.m.

Arrival & check-in: 8:45 ~ 9:00

Age/Grades:

3 years old (potty trained)
to

entering **5th** grade fall 2008

Registration forms can also be downloaded from our website at www.knoxpres.org

Theme:

Jesus gives us the power...

Monday ~ to be thankful.

Tuesday ~ to help others.

Wednesday ~ to be brave.

Thursday ~ to live forever.

Friday ~ to tell others about God.

Participant's name: _____

Parent's name: _____ Email: _____

Address: _____ City: _____ Zip: _____

Home phone: _____ Work phone: _____

Cell phone: _____ Emergency phone: _____

Fee: \$27.00 by May 27

Fee: \$ 35.00 after May 27 paid check # _____ cash _____
preorder the music CD (include an additional \$5.00)

Today's date: _____ (Scholarships are available) (checks payable to Knox)

Age as of June 16th (circle one):

3 yrs. 4 yrs. 5 yrs. (**not** entering Kindergarten)

Entering Kindergarten Entering 1st grade Entering 2nd grade Entering 3rd grade

Entering 4th grade Entering 5th grade

Would like to be in the same group with _____ (needs to be the same age)

Birth Date: _____

Allergies/medical concerns: _____

Physician's Name and phone number: _____

I, the parent/guardian of _____ give my permission for him/her to participate in Knox VBS. In case of emergency and I cannot be reached, I also give my permission for him/her to receive medical treatment that is deemed necessary by medical staff.

Signed _____ **Date:** _____

Insurance Company: _____ **Policy #:** _____

I can volunteer 5 days _____ **4 days** _____ **3 days** _____ **2 days** _____

I would like to volunteer in the following areas

_____ Teach _____ Set up Sunday, June 15 after 1:00 p.m.

_____ Recreation _____ Clean-up Friday, June 20th 12 Noon ~ 2:00 p.m.

_____ Crafts _____ Crafts - (prep work)

_____ Snacks _____ Nursery

_____ Music _____ help set up end of VBS luncheon, Friday, June 20 10:00 ~ 1:00

_____ I need nursery care for _____ children, ages _____