

**SAINT KATHARINE DREXEL CHURCH
VACATION BIBLE SCHOOL
JULY 28-August 1, 2024
REGISTRATION**

Parent/Guardian Name: _____

Address: _____

City, State, Zip _____ Home Telephone: _____

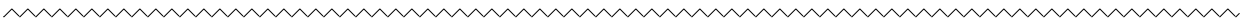
Mom's Cell #: _____ Dad's Cell #: _____

Email: _____

OTHER EMERGENCY CONTACT NUMBERS:

Name _____ Number: _____ Relationship: _____

Name _____ Number: _____ Relationship: _____



CHILD'S NAME	MALE/ FEMALE	AGE	BIRTH DATE	POTTY TRAINED?	Shirt Size

_____ I have attached a signed and completed Permission/Liability/Medical Release form for each child attending.

(Parent Signature)

**The registration fee is \$25.00 per child.
Checks can be made out to "Saint Katharine Drexel Church".**

Please mail the completed forms and payment of \$25.00 to: Saint Katharine Drexel Church, 1 Peter Drive, Mechanicsburg, PA 17050. Attention: Deacon Scott Root