



**REGISTRATION FOR
VACATION BIBLE SCHOOL**

June 22 - 26, 2009

8:30 - 11:30 a.m.

**Shrine of St. Anne School
Children entering Grades K thru 6th**

Parent / Guardian Name _____

Address _____

City / Zip _____ Home phone # _____

Work phone # _____ Cell phone # _____

Email Address _____

Emergency contact person _____ Relationship to child _____

Home Phone# _____ Cell phone# _____

Allergies or special info: _____

Child's name	Birthdate	Grade entering in <u>Fall 2009</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Would you be willing to assist us in this Vacation Bible School? YES NO

Fee - \$15.00 per child Make checks payable to: *Shrine of St. Anne*

Amount due _____ Date paid _____ Check# _____ Cash _____

Balance due by June 12, 2009 _____

Return to Parish Office – 7555 Grant Place, Arvada, CO 80002; Attn.: Karen Oldham, VBS