



Vacation Ventures June 9 - 13, 2008 Registration

9:00 am to 12:00 noon

(Please fill out one form per child.)

REGISTRATION DEADLINE IS MAY 1ST; SPACE IS LIMITED!

Child Information:

Name _____

Birthday _____ Gender M/F Age/Grade Entering Fall 2008 _____

Children's T Shirt Size: XS 2/4 S 6/8 M 8/10 L 10/12

Parent/Guardian Information:

Name _____

Address _____ Zip Code _____

Phone Numbers: Home _____ Alternate _____

Email: _____

Parents/Grandparents are strongly encouraged to volunteer!

Volunteer Opportunities: (Please select three and rank in order of preference.)

____ Set Up ____ Clean Up ____ Floater ____ Activity Leader (ex: Art)
____ Decorations ____ Prep Work ____ Snack Leader ____ Morning Registration
____ Crew Leader (ex: Take children to activities)

Adult T Shirt Size: S / M / L / XL

Other Information:

1. Health problems, allergies, and/or special needs for your child? _____

2. Other person(s) who is authorized to pick up your child _____

In case of an emergency contact:

Name _____ Phone _____

Physician's Name _____ Phone _____

Release for Emergency Room Treatment

I hereby give my permission for _____ to attend Trinity Presbyterian Church's Vacation Ventures 2008. I will not hold the church responsible for any accident which may occur. Should my child need medical attention, I give my permission for my child to be treated by a competent doctor, if I cannot be reached.

Parent/Guardian Signature: _____ Date: _____

There is no fee for Vacation Ventures.

Mail form to Trinity Presbyterian Church, 3003 Howell Mill Road, Atlanta, GA 30327.

Please contact Erin McGee at 404-237-6491 with any questions.