

Kid Trek Wednesday Registration Form

Winter Session

Date: _____

Child's Name: _____

Male Female

Pick the program OR excursion your child will participate in. Cost: \$20/child per session

PROGRAMS

- Explorers (4 yrs-Kindergarten)
- Voyagers (1st/2nd grade)
- Adventurers (3rd-5th grade)

EXCURSIONS

- Primary Praise (4 yrs-1st grade)

Date of Birth: ____/____/____ Child's Age: _____ Grade: _____

Is VCG your home church? Yes No If no, what is your home church? _____

Address: _____ City: _____ State: ____ Zip: _____

Parent Email: _____ Home Phone: _____

Mom's Name: _____ Mom's Cell Phone: _____

Dad's Name: _____ Dad's Cell Phone: _____

Can we text your cell phone in case of emergency? Yes No

ALLERGIES/Conditions/Special Concerns: Yes No (if Yes, please list)

List one friend that you would like to be in group with: _____

How can parents be reached on Wednesday nights? _____

Emergency Contact Name: _____ Phone: _____

I give permission for my child to be photographed and/or videotaped for Village Church promotional and/or website use: Yes No

Would you be available to volunteer in one of the classrooms? Yes No

OFFICE USE ONLY

Check #: _____ \$ _____

Online Date: _____

Group Assignment:

Explorers _____ Voyagers _____ Adventurers _____

Primary Praise _____