

Registration Form - 2018

Child's Name _____ Birthdate _____
 (Last Name) (First Name)

Allergies _____ Medication _____

Parent's Names _____

Address _____

Home Phone _____ Cell Phone _____

E-mail Address _____

Doctor's Name _____ Dr.'s Phone _____

Emergency Contact: (if parent cannot be reached)

Name _____ Relationship to Child _____

Home Phone _____ Cell Phone _____

Week #	Two Day Program (T, Th) <small>r GNS s / non</small>	Three Day Program (M, W, F) <small>r GNS s / non</small>	Five Day Program (M - F) <small>r GNS s / non</small>
1	_____ June (12, 14) (\$74/94)	_____ June (11, 13, 15) (\$96/126)	_____ June (11 - 15) (\$110/160)
2	_____ June (19, 21) (\$74/94)	_____ June (18, 20, 22) (\$96/126)	_____ June (18 - 22) (\$110/160)
3	_____ June (26, 28) (\$74/94)	_____ June (25, 27, 29) (\$96/126)	_____ June (25 - 29) (\$110/160)
4	_____ July (3, 5) (\$74/94)	_____ July (2, 3, 6) (\$96/126)	_____ July (2, 3, 5, 6) (\$108/148)
5	_____ July (10, 12) (\$74/94)	_____ July (9, 11, 13) (\$96/126)	_____ July (9 - 13) (\$110/160)
6	_____ July (17, 19) (\$74/94)	_____ July (16, 18, 20) (\$96/126)	_____ July (16 - 20) (\$110/160)
7	VACATION BIBLE SCHOOL (VBS) - FIVE DAY PROGRAM - JULY 23 - 27 REGISTER WITH THE CHURCH		
8	_____ July (31, 2) (\$74/94)	_____ July (30, 1, 3) (\$96/126)	_____ July (30 - 3) (\$110/160)
9	_____ Aug (7, 9) (\$74/94)	_____ Aug (6, 8, 10) (\$96/126)	_____ Aug (6 - 10) (\$110/160)
10	_____ Aug (14, 16) (\$74/94)	_____ Aug (13, 15, 17) (\$96/126)	_____ Aug (13 - 17) (\$110/160)

r GNS s = registered Grace Nursery School student (Child was registered for the 2017-18 school year and/or child is registered for the 2018-19 school year)
 non = non-registered Grace Nursery School student (Child was not registered for the 2017-18 school year and child is not registered for the 2018-19 school year)

Office Only - Do not write:

Check Number # _____ Total Amount : \$ _____