

Vacation Bible School Student Assistant Application

June 19 -June 23, 2023

Name:			
Address:			
Phone:	!	Email:	
Birth Date:	<i>F</i>	Age/Grade:	
Participant commit	ment:		
l agree to faithfully Vacation Bible Scho			t the Federated Church June 23, 2023.
Signature:		Date: _	
Parental Permissior	ո (Required if բ	oarticipant is un	der age 18)
			le one) give permission to sistant at The Federated
Church during the v			
Signature:		Date: _	
l am available on th	ese days: (plea	ase check availa	ble days)
Monday June 19	_Tuesday Jur	ne 20Wedne	esday June 21
Thursday June 22	Friday June	23	
l am interested in h	elping with:		
Games	_Worship	Crafts	_Kitchen Help
Music	_Other		

Emergency Contact Information

Primary contact:	Relation:		_	
Address:	Email:			
Home phone:	Cell phone:			
Alternate contact:	Relation	ation:		
Address:	Email:	<u>-</u>		
Home phone:	Cell phone:			
Medical Insurance:				
Policy number:				
Telephone:				
Family doctor:		_		
Food/Other Allergies?		Yes	No	
Current Medications?		Yes	No	
Dietary Restrictions?		Yes	No	
Physical Limitations?		Yes	No	
Are there other health is	sue you would like to	o mention?	Yes	No
Participant Signature		Date:	_	
Parent Signature		Date:		

Required if participant is under age 18