

BAOBAB BLAST - GOD'S GREAT GET-TOGETHER **JUNE 21 - 25, 2010**

**Vacation Bible School at St. Matthew Lutheran Church
720 Dundee Avenue, Barrington, IL 60010 (847) 382-7002**

The African Baobab tree is a community meeting place. Come meet friends at Baobab Blast for a week of Grassland Games, Kalahari Crafts, Serengeti Science, Madagascar Music and Savannah Storytelling. Let's get together under the Baobab!

Sign up today for a week of fun, and invite your friends to come along!

Groups for children age 3 through grade 6 (completed in June) are forming now. VBS begins at 9:00 a.m. and ends at NOON each day.

PLEASE COMPLETE THIS FORM and the ORANGE PICK-UP FORM for each child, AND RETURN ALL FORMS BY MONDAY, JUNE 14, 2010.

Name of Child: _____ **Child's Birth date:** _____

School grade COMPLETED June, 2010: _____

Please answer the following questions to help us better serve your child:

Has your young child (3,4,5-yr-old) attended pre-school? YES * NO

***If you answered "NO," plan to stay with your child on Monday, June 21, to insure that your child will feel comfortable with new people and surroundings. Children must be toilet-trained in order to attend.**

Does your child have a medical condition, allergy (including food), physical restriction, or behavior pattern of which we need to be aware? _____

*******COMPLETE BOTH SECTIONS ON THE OTHER SIDE*******

YOU MUST COMPLETE THIS SIDE IN ORDER TO REGISTER YOUR CHILD FOR VBS.

(Please print clearly)

Home address: _____ City: _____ Zip: _____

Home phone: _____ Mother's cell/pager #: _____

Father's cell/pager #: _____

Family Church: _____

Emergency contact name(s): _____

Relationship to child: _____

Phone number(s) for emergency contact: _____

If parents cannot be reached in an emergency, the contact person will be called.

Doctor's name: _____ Phone #: _____

PARENTAL PERMISSION

**The undersigned hereby gives permission for (son/daughter) _____
to attend and participate in Vacation Bible School at St. Matthew Lutheran Church, 720
Dundee Avenue, Barrington, IL, 60010, June 21-25, 2010.**

In consideration of volunteer services by others, we/I hold free from liability St. Matthew Lutheran Church and its Vacation Bible School staff for any reasonable action taken in an emergency situation, illness, or wrongful act by our/my child.

Father's Name (print): _____ Signature: _____

Mother's Name (print): _____ Signature: _____

Guardian's Name (print): _____ Signature: _____

Please return this form and the orange pick-up form by JUNE 14, 2010, to St. Matthew Lutheran Church (mail, fax, drop it off at the church, complete online). You will receive a confirmation of your child's registration and group assignment for VBS in early June.

**** If you are registering on our website, you will need to sign all forms on June 21 at the registration tables.****

For additional information please contact the church office:

Phone: (847) 382-7002

Fax: (847) 382-7017

Website: www.stmatthewbarrington.org

++KEEP THIS SHEET AS YOUR VBS REMINDER!++

Dates: June 21 - 25, 2010
Time: 9:00 a.m. - Noon Monday through Friday
Place: St. Matthew Lutheran Church
720 Dundee Avenue, Barrington, IL 60010
(847) 382-7002
www.stmatthewbarrington.org

Please register early. Our facilities limit the number of students we can safely accommodate in each classroom.

See you in June at >>> **BAOBAB BLAST**

VACATION BIBLE SCHOOL STUDENT PICK-UP FORM

(FILL OUT A SEPARATE FORM FOR EACH CHILD and RETURN WITH REGISTRATION.)
For the **SAFETY** of our students, **ALL CHILDREN must be picked up in their classrooms each day by their parents.** Children will not be dismissed to exit the building by themselves. If a grandparent or other adult will be picking up your child(ren) on any VBS day, please print the person's complete name and all phone/pager numbers. Do not send someone that your child does not know. **Older siblings are not a substitute for a parent unless they are over sixteen and are listed below.**

CHILD'S NAME: _____

PARENT only: I am the only person picking up my child from VBS June 21-25, 2010

Signed: _____

Date: _____

Fill in the bottom **only** if another person will be picking up your child during the week.

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The following person/people will pick up my child

Mon., June 21 Name: _____

Phone numbers: _____

Tues., June 22 Name: _____

Phone numbers: _____

Wed., June 23 Name: _____

Phone numbers: _____

Thur., June 24 Name: _____

Phone numbers: _____

Fri., June 25 Name: _____

Phone numbers: _____

Parent's Signature: _____

Date: _____

If any of this information changes, you will need to update this form on Monday, June 21, at the Registration table.