



Roar VBS 2019

Registration Form for Scholarship Request

Pathfinder Church (formerly St. John)

Online registration is available at www.pathfinderstl.org

Registrant Information (one child per form)

Please Print

Last Name: _____ First Name: _____

Birth Date: ____/____/____ Gender: ☐ Male ☐ Female

Grade (Fall 2019): _____ School Attending (Fall 2019): _____

Minimum age is 3 years old by July 31, 2019 and potty-trained.

☐ 3yr old ☐ 1st grade ☐ 2nd grade ☐ 4th grade
☐ 4yr old ☐ Kindergarten ☐ 3rd grade ☐ 5th grade

T-shirt Size: (circle one) Youth: XS S M L XL **OR** Adult: S M L

Address: _____ City: _____ Zip: _____

Parent's Name(s): _____ Main/Home Phone: _____

Cell Phone (dad): _____ Cell Phone (mom): _____

E-mail: _____

Has the registrant previously attended VBS at Pathfinder (formerly St. John)? Yes ☐ No ☐

Emergency Contact if parents cannot be reached (friend, neighbor, relative)

Name: _____ Phone: _____

Allergies/Special Needs

Allergies: _____

Will the child be bringing an EpiPen with them to VBS? ☐ Yes ☐ No

Is there something unique you would like to share about your child that would assist us in making this experience a great one? (health concerns, special needs such as sensory concerns, ADHD, Autism, Asperger's, Down Syndrome, etc)

Permission

The registrant has my permission to participate in Pathfinder VBS 2019. I understand when participating in VBS activities, the registrant may be photographed for print, video, or electronic imaging. I understand the images may be used in promotional materials for Pathfinder Church. I acknowledge the images will be the sole property of Pathfinder Church.

Signature of Parent/Guardian _____ Date _____

Registration Fees/Scholarship Request (check all that apply)

- ☐ I am requesting a scholarship for the entire \$45 registration fee.
☐ I am requesting a scholarship in the amount of \$ _____.
☐ Cash ☐ Check # _____

We want every child to experience God's love through Vacation Bible School. We will honor all scholarship requests. Make checks payable to Pathfinder Church. Do not combine registration fees for Pathfinder VBS and After Party in the same check.

Friend Request

- If your child would like to be placed in a group with friends, their registration forms must be **stapled** and **submitted together**. Online registration is not available if you are requesting placement with a friend.
- We can place a maximum of 3 friends in the same group (your child plus 2 friends). If more than 3 forms are turned in together, they will NOT automatically be placed in the same group.
- Friends must request each other.
- If friends requesting placement together are not the same grade level, they will be placed in the youngest grade.

Friend Requests: 1) _____

Write in friend name(s) when
you attach their form.

2) _____

Office Use Only CREW
Intake _____ Date _____



Questions? Contact us at vbsregistration@pathfinderstl.org or 636.394.4100 ext. 826

Mail to or drop off forms at Pathfinder Church, 15800 Manchester Rd, Ellisville, MO 63011