

ST. PETER'S UNITED METHODIST CHURCH
Summer VPK

REGISTRATION FORM – SUMMER VPK 2011

Summer VPK dates Monday June 6 thru Thurs. August 11
No VPK on Monday 7-4 Daily Hours 9:00 3:15

Child's Name: _____

Birthdate: _____

Address: _____

City: _____

Mother's Name: _____

Daytime Phone #: _____

Cell #: _____

Father's Name: _____

Daytime Phone #: _____

Cell #: _____

Alternate Person to call: _____

Phone #: _____

Email: _____

Alleries/Medications/Concerns: _____
