**St. Mark’s Vacation Bible School (VBS) 2017**

**Iglesia Episcopal de San Marcos**

**Escuela Bíblica de Vacaciones (VBS) 2017**

**Registration Form/ Forma de Registracion**

Childs name\* Nombre del Nino/a\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age\*Edad del Nino/a\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \*Telephono en casa\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone \*Telefono Celular\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\* Domicilio\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City\* Ciudad\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State \*Estado\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip\_\_\_\_\_\_\_\_\_\_\_

Email \*Correo Electronico en casa\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grade\* Grado Completado en la Escuela\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Father & Mother or Guardian\* Nombre del Padre o Madre o Guardian\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other contacts\* Otro Contacto \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Allergies or Medical Conditions \*Alergias u otras Condiciones Medicas

Special instructions\* Avisos o Instrucciones Especiales

My student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_has my permission

to participate in ***St. Mark’s Vacation Bible School*** . I give St. Mark’s and Episcopal Community Services permission to use my child’s picture in any publication (Mi estudiante tiene mi permiso --El nombre del participante-- participar en la Escuela de Biblia de Vacaciones de l’iglesia de San Marcos. Doy permiso a San Marcos y episcopales servicios comunitarios para utilizar mi niño la imagen en cualquier publicación.)

Parent Signature\*Nombre del Padre o Madre o Guardian

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