

VBS – RAINFOREST 2017**Participant Registration****Huntingdon CMA Church**

| | |
|--------------------------------|--|
| Participant First Name | |
| Participant Last Name | |
| Parent/Guardian First Name | |
| Parent/Guardian Last Name | |
| Gender | |
| Grade just completed | |
| Address | |
| Contact Phone 1 | |
| Contact Phone 2 | |
| Parent/Guardian Email | |
| City | |
| State / Province | |
| Zip | |
| Allergies | |
| Medical | |
| Emergency Contact Name | |
| Emergency Contact Phone | |
| Emergency Contact Relationship | |
| Alternate Pickup Name | |
| Alternate Pickup Phone | |
| Alternate Pickup 2 Name | |
| Alternate Pickup 2 Phone | |
| Additional Comments | |