

VPK
+
Kindergarten



CUBBY BEARS REGISTRATION CARD

Name _____ Birthday _____

Address _____

City _____ State _____ Zip _____

Home phone () _____ Cell () _____

Other phone () _____ Date enrolled _____

Parent(s) name(s) _____ Do they attend this church? _____

Where can parents be reached during Cubby Bears? _____

Person authorized to pick up child _____

Special information about child _____

Allergies _____