

STUDIO GO!

Name _____ Age _____ Grade Entering _____

Date of Birth _____ Has your child been baptized? Yes No If yes, how old was he/she _____

Parent/Guardian _____ Home Phone _____

Address _____ Cell Phone _____

City _____ State _____ Zip _____ E-mail _____

Other Emergency Contact Name & Number _____

T-Shirt Size _____ Church Home: Carterville Christian Church Other: _____

Special Needs and/or Allergies _____

Siblings attending VBS _____

Other Information (Completed by the church) _____

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