

***Dear Parents,***

Our church will be conducting LifeWay's "Journey Off the Map" for Vacation Bible School this year, from July 13<sup>th</sup> through the 17<sup>th</sup>. We are pleased that your children will be joining us for the fun and excitement! During the journey, kids will discover that Jesus is our Ultimate Guide. Each day kids will visit the "Tangled Branch Tree House" for Bible stories, "Survival Springs" for snacks, "Rushing Waters" to learn songs, and "Shady Grove" to create fun crafts. Our church is eagerly waiting to welcome your children to this free event for ages 4/Pre-K (MUST be toilet trained) through High School.

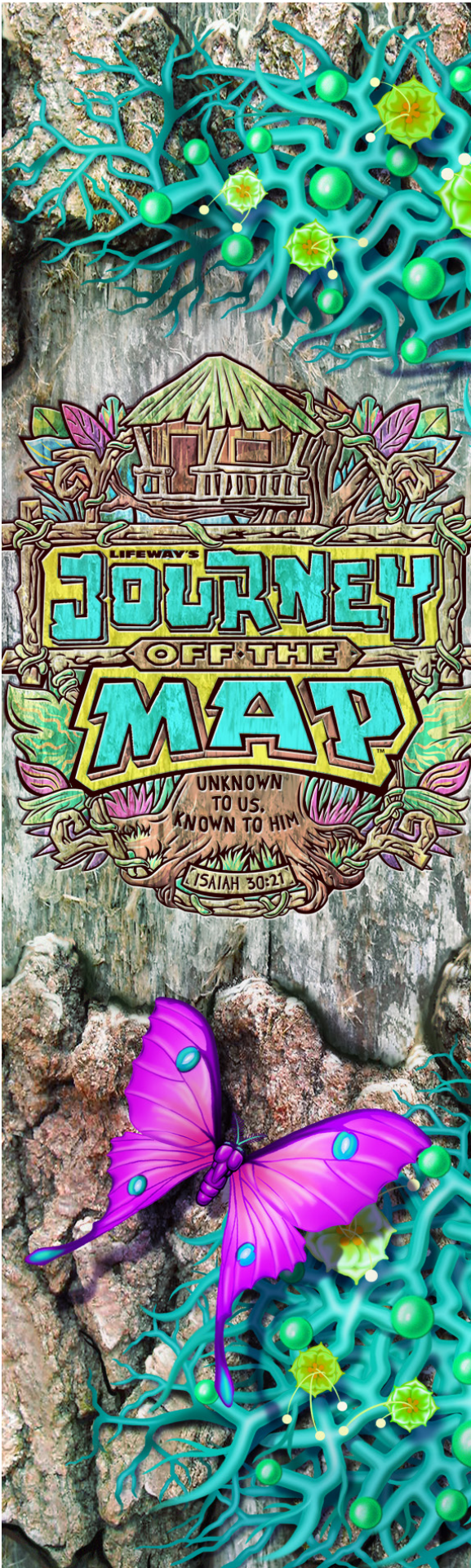
The church telephone number is 609-465-5511 or visit our website for more details: [www.firstbaptistcourthouse.org](http://www.firstbaptistcourthouse.org)

There are a few items that we wish to bring to your attention:

1. We encourage you to Pre-Register your children by Monday July 6<sup>th</sup> to ease the paperwork process. Each evening we will begin promptly at 6 pm and would appreciate children arriving a few minutes before.
2. For security reasons, we request that a designated adult come inside to pick up their child each night at 8 pm.
3. Our Mission focus for VBS is to provide financial support for the Williamson's; a missionary family heading back to Ecuador. We will collect an offering each evening and encourage children's participation. Offerings in check form should be made out to "First Baptist Church of Cape May" with notation, "for the Williamson's."
4. On Friday July 17<sup>th</sup> you are invited back to the church to experience the excitement of "Journey Off the Map" Family Night at 7:30 pm, followed by snacks at "Survival Springs."
5. On July 19<sup>th</sup> join us for a Special Sunday VBS Service & Celebration at 9:30 am.

We thank you for your understanding and participation,

*The "Journey Off the Map" VBS Staff - 2015*



# REGISTRATION FORM

Child's Name \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Address \_\_\_\_\_

*(street address, city, state, and zip code)*

Mailing Address *(if different)* \_\_\_\_\_

## Phone Numbers

Home \_\_\_\_\_

Work \_\_\_\_\_

Cell \_\_\_\_\_

Email \_\_\_\_\_

## Age Information

Birth date \_\_\_\_\_ Last grade completed in school \_\_\_\_\_

## Medical Information

Medical or other information we need to know. (Please include any food allergies.)

\_\_\_\_\_  
\_\_\_\_\_

## Emergency Contacts (other than listed above)

Name \_\_\_\_\_ Phone number \_\_\_\_\_

Name \_\_\_\_\_ Phone number \_\_\_\_\_

## Dismissal Information

Who may pick up your child at the end of each VBS day?

\_\_\_\_\_

## Other Information

Does your child attend Sunday School? If so where?

\_\_\_\_\_

If your child is visiting our church, who is he a guest of?

\_\_\_\_\_

May we have permission to photograph your child? Yes      No

May we have permission to use your child's photograph for the purpose of promotion? Yes      No