

**LUTHERAN CHURCH OF THE GOOD SHEPHERD  
VACATION BIBLE SCHOOL  
JUNE 22 to 26, 2009**

9 a.m. to 3:30 for those in grades 1 to 6, 9 a.m. to noon for ages 4-KG

**Name** (legal, and nickname if applicable) \_\_\_\_\_

**Date of birth** \_\_\_\_\_ **Male** \_\_\_ **Female** \_\_\_

**Grade and school camper will enter in 9/2009** \_\_\_\_\_

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

**City, State ZIP** \_\_\_\_\_

**Parent home phone** \_\_\_\_\_ **Work** \_\_\_\_\_ **Cell** \_\_\_\_\_

**E-mail address** \_\_\_\_\_

**Church membership** \_\_\_\_\_

**If none, are you interested in church membership?** \_\_\_\_\_

**Parent/Guardian Name(s)** \_\_\_\_\_

**Parent/Guardian Address (if different)** \_\_\_\_\_

**Emergency Contact Names:**

**(1) Name** \_\_\_\_\_ **Phone** \_\_\_\_\_

**(2) Name** \_\_\_\_\_ **Phone** \_\_\_\_\_

\_\_\_ **Parent(s):** Check here if you are interested in volunteering at camp, anything from providing snacks to being on-site.

**Camp cost:**

**Pre-K/Kindergarten (9 a.m. to noon) \$25 (Age 4 or older by July 1)**

**1<sup>st</sup> through 6th Grades (9:00-3:30) \$50**

***Make checks payable to Lutheran Church of the Good Shepherd.***

\_\_\_ Check here if you need help paying or if you need a payment plan. Our children's ministries coordinator will contact you. No one will be turned away for financial reasons.

**DEADLINE TO REGISTER: June 9, 2009**

Return form to:  
Good Shepherd VBS  
Attn: Missy Tade  
1601 North St  
Olympia WA 98501

LCGS Day Camp Registration Packet  
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