

ST. ROSE OF LIMA CHURCH PARISH HALL
10 ACADEMY STREET, OXFORD, NJ
908-453-2636

VACATION BIBLE SCHOOL REGISTRATION FORM
(One per child-please print)

Name _____

Address _____

Date of Birth _____ Age _____

Mother: _____

Father: _____

Home Telephone _____

Cell Phone _____

E-Mail Address _____

Emergency contact person: _____

Phone: _____

2nd Emergency Contact Person: _____

Phone: _____

Allergies or other medical conditions: _____

Parents Signature and Date _____

Name of a special friend your child might like to be with:
