



2023 STELLAR!
VBS Registration Form
Age 4 through 6th grade
August 6th-10th
6:00-8:30pm
Church of St. Luke,
Clearwater, MN

ONE FORM NEEDED FOR EACH PARTICIPANT

Name _____ Birthdate _____ Gender _____ Age _____

Street Address _____

City _____ State _____ Zip _____

Home Phone (_____) _____

Parent(s) name(s) _____

Parent Cell Phone (_____) _____

E-mail _____

In case of emergency & I can't be reached, contact _____

Phone _____

Allergies or other Medical Conditions we should know about _____

School grade your child is entering this fall _____

Name of home parish/church _____

I hereby GRANT permission for my child _____ (name)

to attend STELLAR Shine Jesus' Light! VBS at St. Luke on August 6-10, 2023.

I hereby GRANT DO NOT GRANT (please circle one) permission for St. Luke to
use the image of my child at VBS on St. Luke publications, either printed or electronic.

Parent/ Guardian print name _____

Parent/Guardian signature _____ Date _____