



POTOMAC BAPTIST CHURCH

COSMIC CITY™ Vacation Bible School

July 20 – 25, 2008 • 6 – 8:45 p.m.

Child's Name _____ Group Assignment _____

Birth Date _____ Age _____ Grade _____

Name of Siblings attending VBS _____

Parents' Names _____

Address _____

Home Phone _____ Work Phone _____

Pager or Cell Phone _____ Church Home _____

Emergency Contact _____ Relationship _____

Phone _____ Allergies/Health Conditions _____

I permit my child's name and food allergy to be posted for VBS staff members to see: Yes___ No ___

My child has my permission to attend and participate in *Cosmic City™* VBS Program.

Parent Signature _____ Date _____