



(Riders must be at least 5 years old, unless accompanied by a parent/guardian)

- Mother/Guardian: _____ Father/Guardian: _____
- Address: _____
- City: _____ State: _____ Zip: _____
- Phone #: _____ Secondary Phone contact: _____
- Email contact: _____

Name of Child	Birth Day	Grade	Allergies/Special Needs
1. _____	___/___/___	_____	_____
2. _____	___/___/___	_____	_____
3. _____	___/___/___	_____	_____
4. _____	___/___/___	_____	_____
5. _____	___/___/___	_____	_____
6. _____	___/___/___	_____	_____

☐ *Check here if additional comments are written on the back*

The children listed on this form have my permission to attend and participate at Victory Baptist Church. It is understood that VBC maintains communication through personal visits or by other means to keep the Riders and Parents informed

Signature of Parent/Guardian: _____ Date: _____