



# Bethany Busy Bee VBS & Summer Camps 2025 Registration Form

6240 So. Broadway, Centennial, CO 80121 - (303) 468-9521

**PARENT'S INFORMATION:**

Father's Name \_\_\_\_\_ Contact Phone# \_\_\_\_\_  
 Mother's Name \_\_\_\_\_ Contact Phone# \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_ Main Contact:  Mom  Dad  
 Email contact \_\_\_\_\_ Church Home \_\_\_\_\_

**VBS**  
 Ages 2½-5<sup>th</sup> grade  
 June 17, 18, 19 & 20  
 Tuesday thru Friday  
 9AM – 12PM  
 \$50 per child  
 200 spots

**Science Exploration**  
 Ages 2½-8 years  
 July 8, 9, & 10  
 Tuesday thru Thursday  
 9AM – 1PM  
 \$150 per child  
 \*Send a lunch each day.  
 50 spots

**Wacky Art**  
 Ages 2½-8 years  
 July 15, 16, & 17  
 Tuesday thru Thursday  
 9AM – 1PM  
 \$150 per child  
 \*Send a lunch each day.  
 50 spots

**Theatre Camp**  
 Ages 2½-5<sup>th</sup> grade  
 July 22, 23, 24, & 25  
 Tuesday thru Friday  
 9AM – 1PM  
 \$200 per child  
 \*Send a lunch each day.  
 50 spots

**ENROLLMENT INFORMATION:**

1. Child's Name \_\_\_\_\_ Birthdate \_\_\_\_\_ Age \_\_\_\_\_ Grade Completed \_\_\_\_\_ Gender \_\_\_\_\_  
 Camp(s) Enrolling:  VBS  Science Exploration  Wacky Art  Theatre  
 Allergies, other Medical Conditions, or Food Preferences \_\_\_\_\_ Place with Friend: \_\_\_\_\_

2. Child's Name \_\_\_\_\_ Birthdate \_\_\_\_\_ Age \_\_\_\_\_ Grade Completed \_\_\_\_\_ Gender \_\_\_\_\_  
 Camp(s) Enrolling:  VBS  Science Exploration  Wacky Art  Theatre  
 Allergies, other Medical Conditions, or Food Preferences \_\_\_\_\_ Place with Friend: \_\_\_\_\_

3. Child's Name \_\_\_\_\_ Birthdate \_\_\_\_\_ Age \_\_\_\_\_ Grade Completed \_\_\_\_\_ Gender \_\_\_\_\_  
 Camp(s) Enrolling:  VBS  Science Exploration  Wacky Art  Theatre  
 Allergies, other Medical Conditions, or Food Preferences \_\_\_\_\_ Place with Friend: \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION:**

Name and phone of someone we can contact in an emergency if we are unable to reach the parents:  
 Name \_\_\_\_\_ Phone \_\_\_\_\_

Child's Doctor \_\_\_\_\_ Phone \_\_\_\_\_ Dentist \_\_\_\_\_ Phone \_\_\_\_\_  
 Hospital of Choice \_\_\_\_\_ Insurance Information \_\_\_\_\_

1. Names of persons authorized to pick up your child \_\_\_\_\_  
 2. Name of persons you **DO NOT** want picking up your child \_\_\_\_\_

☺ **Payment secures your spot. Limited spaces are available per camp, first come first enrolled. Register soon!**

**PAYMENT INFORMATION:**

**VBS \$50 per child** ~ Total Number of Kids Attending: \_\_\_\_\_ Total VBS Amount \$ \_\_\_\_\_  
 **Science Exploration \$150 per child** ~ Total Number of Kids Attending: \_\_\_\_\_ Total Science Amount \$ \_\_\_\_\_  
 **Wacky Art \$150 per child** ~ Total Number of Kids Attending: \_\_\_\_\_ Total Wacky Art Amount \$ \_\_\_\_\_  
 **Theatre Camp \$200 per child** ~ Total Number of Kids Attending: \_\_\_\_\_ Total Theatre Amount \$ \_\_\_\_\_

**Total Amount \$ \_\_\_\_\_ Date Paid \_\_\_\_\_ Check# \_\_\_\_\_  Cash  CC**