



# Fort Rucker Vacation Bible School

July 14-16, 2026 • 0830-1130

Wings Chapel  
Bldg 6036

## Registration Form

Complete one registration form per Family  
Kindergarten thru 6<sup>th</sup> Grade

### DATE OF REGISTRATION

/ / 

Parent/Legal Guardian Name(s)

Street Address

City  State  Zip Code

Parents/Legal Guardians' Phone Number(s)

Email Address

### Privacy Act Statement:

Data required by the Privacy Act of 1974, Title of Form: Vacation Bible School Registration Form, Prescribing Directive: 1. Authority: Title 10 USC Section 3457 (b). Principal Purpose: (a) To provide sufficient background information on families/students to ensure the structuring of meaningful religious education for the Chapel community; (b) To provide means of locating parents/students, including in emergencies for the Vacation Bible School program. 2. Routine Uses: (a) To provide lists of students/parents, with addresses and phone numbers, for class rosters, on Individual Providing Information: Disclosure of information requested is voluntary. However, failure to do so will result in non-registration of children for Vacation Bible School. Disclosure of parent's SSN is not required.

List all Family Members attending Fort Rucker VBS in the space below. Print name(s) and enter Fall 2026 age and school grade.

Name	Age	School Grade	Escort/Emergency Contact
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Allergies or other medical conditions:

Other person(s) authorized to pick up or escort child(ren):

**Chapel Release Form for Use of Personal Images:** We do take photographs during VBS. These will be used in-house only. Your signature below grants us permission to take videos, photographs and/or slides of your child.

Please return form to: Wings Chapel (Bldg 6036, Andrews Avenue, Fort Rucker, AL) or email: [anna.m.crittendon.mil@army.mil](mailto:anna.m.crittendon.mil@army.mil)

Parent/Legal Guardian PRINTED name

Parent/Legal Guardian Signature

THANK YOU FOR REGISTERING!