

# Union Church Vacation Bible School 2026

## Registration Details

### Child Registration Information

**Child Name:** Faye Stimpson **Date of Birth:** 09/08/2015  
**Parent/Guardian:** Melissa Stimpson **Age:** 10  
**Current Grade:** 3rd **Gender:** Female

#### Address

4232 Maderia Avenue Sebring Florida 33872

#### Email Address

annstim89@gmail.com

### Phone Numbers

**Home:** 8634584390 **Cell:** 8634584390  
**Work:** -

### Church / Attendance

#### Home Church

Grace bible

#### Friends at VBS

None

### Health and Safety

#### Allergies / Medical Information

Seasonal airborne allergies, adhd, autism

**Emergency Contact:** Melissa stimpson

**Emergency Phone:** 8634584390

#### Dismissal Information

Melissa stimpson and justin stimpson

### For Office Use Only

**Crew Group:** \_\_\_\_\_

# Special Needs Considerations

Child Name: Faye Stimpson

1. How does your child best communicate his/her needs?

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2. How does your child communicate when she or he does not want something?

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3. What are your child's strengths?

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4. What are your child's challenges?

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5. What does your child like to do?

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6. How does your child socialize/make friends?

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7. Are there any aggressive/inappropriate behaviors we should know about?

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8. Are there any triggers of inappropriate behaviors?

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9. What are some things that help hold your child's attention?

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10. Does your child have any dietary or environmental issues we should be aware of?

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11. Does your child have physical limitations? If so, briefly describe.

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12. Are there medical issues we need to be aware of (seizures, diabetes, medications)?

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13. What are some ways we can help your child learn about God's love?

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14. Is there anything else you would like for us to know?

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