

버지니아 헬로쉽교회 2010 어린이 여름 성경학교

대 상: 초등부: 현 1학년 - 5학년인 학생. 정원 40 명
유치부: 만4세 (2006년 8월 31일 이전생)부터
새학기에 1학년이 되는 학생. 정원 30명

기 간: 2010 8월 9일(월) - 8월 13일(금).
오전 9시 30분-오후 3시

장 소: 버지니아 헬로쉽교회
New Covenant Fellowship Church
1439 Shepard Dr.
Sterling, VA 20164



주제 / 내용: **"High Seas" Expedition**
즐거운 예배와 찬양, 다양하고 즐거운 야외활동,
흥미 있는 성경공부와 게임, 등.
(자세한 여름성경학교 스케줄은 추후에 나갑니다)

등 록: 6/13/09 - 7/11/10
옆의 등록신청서를 기입하셔서 등록비와 함께
친교실 접수처에 제출하시거나
위의 교회 주소로 등록비와 신청서를
우편으로(VBS 담당자 앞) 보내주시기 바랍니다.

등 록비: \$85 (두 자녀: \$80 씩, 세자녀이상: \$75 씩)

★ 조기등록 할인 (6월27일까지) : \$ 75
(두자녀: \$ 70씩, 세자녀이상 \$65씩)

* 수표는 **N.C.F.C.**앞으로 써주시기 바랍니다.
* 7월11일 이후에는 등록금 환불이 되지않습니다.

문의사항이 있으시면 아래 담당자들에게 연락해 주십시오.

초등부: 변세라 전도사 (202-436-4537)

sarapyon@hotmail.com

유치부: 김혜숙 권사 (703-901-6052)

kathyfresh1960@gmail.com



버지니아 헬로쉽 교회 2010 여름 성경학교 등록 신청서

자녀이름 (영어와 한어로 기입해 주세요)	생년월일 (dd/mm/yy)	나이 또는 현재 학년	남/여
1 /		__살 / __학년	
2 /		__살 / __학년	
3 /		__살 / __학년	

여름 성경학교 동안 도와 주실 수 있는 날짜/시간: _____

자녀 음식 알려지? _____

	아버지	어머니
이름		
전화		
e-mail		

주소: _____

비상시연락처: 이름:_____ 전화:_____

현재 소속된 교회: () 헬로쉽교회, 기타: _____

등록비: 현금 () 혹은 수표 #_____ 지불액수 \$_____

I give my child(ren) permission to participate in the NCFC VBS including all the field trips from Aug. 9 through Aug. 13, 2010 at New Covenant Fellowship Church VA Campus. I understand that reasonable caution, chaperones and supervision will be provided by the church and the church staff, but they cannot guarantee the safety of my child(ren). NCFC will not be held responsible for any injury or accident. In the event I cannot be reached in an emergency, I hereby give permission for my child(ren) to be treated by a physician or hospital selected by the staff member in charge.

부모 서명:_____ 등록 날짜:_____

VA New Covenant Fellowship Church 2010 Vacation Bible School

Who: Elementary Dept Current 1st – 5th Graders
(Limited to the first 40 registrants)

Preschool Dept: Children born **prior to August 31, 2006**
through those going into the 1st grade in September
(Limited to the first 30 registrants)

When: August 9th (Mon.) – August 13th (Fri.), 2010
9:30 am – 3:00 pm

Where: New Covenant Fellowship Church (VA)
1439 Shepard Dr.
Sterling, VA 20164

Theme/ **“High Seas” Expedition**

Activities Daily praise and worship, Bible exploration, crafts, fun
field-trips, exciting games, delicious snacks, and much more!
(Detailed schedule will follow.)

Registration: June 13 – July 11, 2010
At the Registration Desk in the Fellowship Hall
or mail this form with the appropriate payment to
the above church address (Attn: VBS)

Fees: \$85 per child
(2 Siblings: \$ 80 each, 3 & more siblings: \$ 75 each)

***Early Bird Discount (until June 27): \$ 75 per child**
(2 siblings: \$ 70 each, 3 & more siblings: \$ 65 each)

* Please make checks payable to **N.C.F.C.**
* No refunds after July 11, 2010.

If you have any questions, please contact

Elementary: Pastor Sara Pyon at 202-436-4537

sarapyon@hotmail.com

Preschool: Mrs. Kathy Haesook Kim at 703-901-6052

kathyfresh1960@gmail.com



VA NCFC 2010 VBS Registration Form

Child's Name	Date of Birth	Age/Grade	Boy/ Girl
1		/	
2		/	
3		/	

Can parent volunteer? If so, day & time: _____

Child's Food Allergies? _____

	Father	Mother
Name		
Phone		
e-mail		

Address: _____

Emergency Contact: Name: _____
(during VBS hours)

Phone #: _____

Attending Church: () N.C.F.C. or Other _____

Fees Paid: Cash () or Check # _____ Amount \$ _____

I give my child(ren) permission to participate in the NCFC VBS, including all field trips from Aug. 9 – 13, 2010 at New Covenant Fellowship Church VA Campus. I understand that reasonable caution, chaperones and supervisors will be provided by the church and the church staff, but they cannot guarantee the safety of my child(ren). NCFC will not be held responsible for any injuries or accidents. In the event I cannot be reached in an emergency, I hereby give permission for my child(ren) to be treated by a physician or hospital selected by a staff member in charge.

Parent's Signature: _____ Date: _____