

VBS 2017 CHILD REGISTRATION FORM / JULY 17 -20, 9:00 AM – 12:00 PM

CHILD'S NAME: _____ MALE / FEMALE _____ DOB: _____

CHILD'S GRADE (COMPLETED) _____ CHILD'S T-SHIRT SIZE: _____

IS THERE A FRIEND YOUR CHILD WOULD LIKE TO BE GROUPED WITH: _____

PARENTS NAMES: _____

PARENT'S EMAIL: (PLEASE PRINT CLEARLY) _____

ADDRESS: _____ CITY: _____ ZIP: _____

PHONE: _____ CELL: _____

EMERGENCY CONTACT: _____ PHONE: _____

DO YOU ATTEND A CHURCH REGULARLY? Y / N IF SO, WHERE? _____

PLEASE LIST ANY ALLERGIES OR MEDICAL CONDITIONS WE SHOULD BE AWARE OF ABOUT YOUR CHILD

_____ YOU ARE INVITED TO A LUNCH ON THURSDAY, JULY 20 AT 11:45. PLEASE RSVP THE TOTAL NUMBER ATTENDING (INCLUDING THE CHILD ATTENDING VBS. IF YOU HAVE MORE THAN 1 CHILD, PLEASE REGISTER ONLY ON ONE FORM).

STAFF OF HOPE CHURCH MAY WANT TO INTERVIEW, PHOTOGRAPH OR VIDEOTAPE YOUR CHILD/REN FOR USE IN PUBLICATIONS, TV REPORTS, CHURCH WEB PAGES AND PUBLIC PRESENTATIONS. PLEASE INITIAL ONE BELOW.

_____ I GIVE PERMISSION FOR MY CHILD/REN TO BE PHOTOGRAPHED OR INTERVIEWED AND TO HAVE MY CHILD'S NAME USED.

_____ I GIVE PERMISSION FOR MY CHILD/REN TO BE PHOTOGRAPHED OR INTERVIEWED, BUT DO NOT WANT MY CHILD'S NAME USED.

_____ I DO NOT GIVE PERMISSION FOR MY CHILD/REN TO BE PHOTOGRAPHED OR INTERVIEWED AND DO NOT WANT MY CHILD'S NAME USED.

I/WE UNDERSTAND AND ACCEPT THAT HOPE'S LEADERSHIP HAS REASONABLE GOALS AND EXPECTATIONS FOR THOSE TAKING PART IN ITS PROGRAMS. SHOULD MY CHILD FAIL TO PARTICIPATE WITHIN THE RULES, I/WE UNDERSTAND THAT I/WE WILL BE CONTACTED AND WILL TAKE RESPONSIBILITY TO COME AND GET MY CHILD. I/WE AGREE TO SUPPORT HOPE'S LEADERSHIP IN ITS DISCIPLINE PROCEDURES. I/WE WILL NOT HOLD HOPE CHURCH OR THE SUPERVISING ADULTS RESPONSIBLE FOR ANY INJURIES OR PROPERTY DAMAGE SUSTAINED ON THIS TRIP. I/WE AGREE THAT I/WE WILL NOT AT ANY TIME IN THE FUTURE PROSECUTE ANY ACTION AGAINST HOPE CHURCH IN CONNECTION TO THE ACTIONS THAT ARE HEREBY RELEASED AND WAIVED BY ME.

PARENT'S SIGNATURE: _____ DATE: _____

IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT KATIE BLISS AT katie.bliss@hopechurchoakdale.com OR 651.738.9652.