

Mountain Bible Church
VBS Registration Form
April 6-10, 2020 9-11 a.m.

Child 1 name: _____ Gender: _____

Age: _____ Birthdate: _____ Grade: _____

Medications, allergies or medical conditions:

Child 2 name: _____ Gender: _____

Age: _____ Birthdate: _____ Grade: _____

Medications, allergies or medical conditions:

Child 3 name: _____ Gender: _____

Age: _____ Birthdate: _____ Grade: _____

Medications, allergies or medical conditions:

Child 4 name: _____ Gender: _____

Age: _____ Birthdate: _____ Grade: _____

Medications, allergies or medical conditions:

Mother's Name: _____ Custodial Parent: Yes ___ No ___

Mother's Cell #: _____ Mother's E-mail: _____

Mother's Address: _____

Father's Name: _____ Custodial Parent: Yes ___ No ___

Father's Cell #: _____ Father's E-mail: _____

Father's Address: _____

Emergency Contact Information: Name(s), Relationship(s) & Cell #(s)

a. _____

b. _____

Dear Parents/Guardians,

Please read the following releases and sign at the bottom.

Release:

To the fullest extent permitted by law, I release Mountain Bible Church, its elders, officers, directors, employees, agents and representatives from any injury, harm, damage or death which may occur to my minor child while participating in the activity and agree to save and hold harmless Mountain Bible Church, its elders, officers, directors, employees, agents and representatives from any claims arising out of my minor child's participation in the activity.

General:

I give my consent for my child(ren) to attend meetings, activities and events, both on site and off site. I will be provided specific event information in advance of any activity that will be taking place offsite.

Medical:

In the event of a medical emergency and when a contact cannot be made in a timely manner to me and/or the emergency contact listed, I give permission for my child(ren) to receive appropriate medical attention. In the event of an unforeseen emergency or any accidents, I release Mountain Bible Church, its employees and volunteers from any liability. I have provided emergency contact numbers and am assured that I will be contacted as soon as possible in the event that there is an emergency.

Photo Release:

Occasionally photos and videos may be taken during VBS, Sunday School, Worship, Youth Group Events or other church activities. I grant permission for Mountain Bible Church to post photos and videos including my child(ren) on its website or in other church publications.

I agree with the above releases. The releases are valid unless I redact in writing.

Parent/Guardian Signature: _____

Parent/Guardian Printed Name: _____

Date: _____