Providence Baptist Church VBS Registration Form

Child 1 name:_____ Gender: _____

Age:_____ Birthdate:_____ Last grade completed:_____

Medications, allergies or medical conditions:_____

VBS Group (to be completed by VBS Registration Crew): _____

Child 2 name:_____ Gender: _____

Age:_____ Birthdate:_____ Last grade completed:_____

Medications, allergies or medical conditions:_____

VBS Group (to be completed by VBS Registration Crew): _____

Child 3 name:_____ Gender: _____

Age:_____ Birthdate:_____ Last grade completed:_____

Medications, allergies or medical conditions:_____

VBS Group (to be completed by VBS Registration Crew): _____

Child 4 name:_____ Gender: _____

Age:_____ Birthdate:_____ Last grade completed:_____

Medications, allergies or medical conditions:_____

VBS Group (to be completed by VBS Registration Crew): _____

Mother's Name: _____

Father's Name: _____

Mother's Cell Phone:_____ Mother's E-Mail:_____

Father's Cell Phone:_____ Father's E-Mail:_____

Address:_____

Emergency Contact Info if different from above:_____

_____

Names of people authorized to pick-up child(ren): _____

(SIGN & DATE BACK OF THIS FORM!)

Parents/Guardians: Please read the releases below and sign at the bottom. This release is valid throughout the week of Vacation Bible School at Providence Baptist Church in Huntsville, Alabama from June 24th -28th, 2019.

_____ Release: To the fullest extent permitted by law, I release Providence Baptist Church 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 Providence Baptist Church from any claims arising out of my minor child's participation in the activity.

_____ 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 my permission for my child(ren) to receive appropriate medical attention. 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.

_____ Photograph release: Occasionally photos & videos may be taken during VBS, Sunday school, worship, youth group events, or other church activities. I grant permission for Providence Baptist Church to post photos and videos including my child(ren) on its website (www.providencebaptist.us) or in other church publications.

I agree with the above releases.

Parent/Guardian Signature: _____

Parent/Guardian Printed Name: _____ Date: _____