

# VBS Registration - CAMP E.D.G.E.



**Families, please complete one form per child. Thank you!**

Last name: \_\_\_\_\_ First name: \_\_\_\_\_

Age: \_\_\_\_\_ Birthday: \_\_\_\_\_

Child's Grade (Fall 2009): \_\_\_\_\_ Sex: Male \_\_\_\_\_ Female \_\_\_\_\_

Child's address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_

Person to be contacted in case of emergency:

Name: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Are there any medical conditions we should be aware of? \_\_\_\_\_ If yes, please explain (allergies, medications, etc.) \_\_\_\_\_

Siblings who will also be attending VBS: \_\_\_\_\_

My child would like to be in a group with the following friend: \_\_\_\_\_

I would like to volunteer to help with \_\_\_\_\_

I will need childcare for \_\_\_\_\_ child/children, ages \_\_\_\_\_

I would like to attend dinner on the following days(Please indicate the number of people who will be eating with us for each day)

Monday \_\_\_\_\_ Tuesday \_\_\_\_\_ Wednesday \_\_\_\_\_ Thursday \_\_\_\_\_ Friday \_\_\_\_\_

Parents, do you plan on staying after dinner for the Stay-cation? \_\_\_\_Yes \_\_\_\_No

The undersigned gives permission to his/her child to participate in the above named activity and releases First United Methodist Church, its officers, employees and agents from any liability whatsoever for any injury or death to person or loss or damage to property sustained by the undersigned for any member of his family, in attendance, and the undersigned agrees to defend and indemnify First United Methodist Church, its officers, employees, and agents from any liability or loss they might sustain by reason thereof. In the event I cannot be reached in an EMERGENCY, I hereby give permission to the physician selected by the director of children's ministry to hospitalize, secure proper treatment for, and order injection, anesthesia, or surgery for my child as named above.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

By signing this registration form, you agree that any photographs taken of your child at or during this event are the property of First United Methodist Church and may be used in future publications as deemed appropriate.