**Immanuel Lutheran Church 2019 VBS Registration**

**Saturday, August 24th 9:30 a.m. – 2:00 p.m.**

**Items marked with a ‘\*’ are required**

Top of Form

Student Name\*



Date of Birth\*



Bottom of Form

Grade Completed\*



Address and Postal Code\*



Email Address



Parent/Guardian Name\*



P/G Day Time Phone Number\*



P/G Cell Phone Number



P/G Relationship to Child\*



Emergency Contact Name\*



EC Day Time Phone Number\*



EC Cell Phone Number



EC Relationship to Child\*



Name of Friend I would like to be grouped with



How did you hear about us?

Friend

Website

Poster

Church Sign

Other

Do you attend a church?

Yes

No

**Medical and Liability Release**

Medical Health Card Number

Registration # (6 digits)



Personal # (9 digits)



Health Conditions (Allergies, Medications, other conditions etc.)\*



Will your child have an epi-pen?\*

Yes

No

Any restrictions in activity or food\*



**MEDICAL & LIABILITY RELEASE**

In the event that I cannot be reached, in an emergency, during the Vacation Bible School 2019, I hereby give my permission to Immanuel Lutheran Church leadership to hospitalize or secure proper medical treatment for my son or daughter as deemed necessary. Every activity sponsored by Immanuel Lutheran Church is carefully planned and adequately supervised by mature adults. However, even with the best planning and precaution, unforeseen events can occur. By checking this box, I as a parent or guardian agree to assume and accept all risks and responsibility for personal injury, damage, and expense whatsoever as a result of my child attending the activities of the Immanuel Lutheran Church Sunday School. I also agree not to hold Immanuel Lutheran Church, its employees or volunteers liable for damages, losses or injuries to the person or property undersigned. I, as a parent or guardian understand that by checking this box I am agreeing that the minor(s) listed on this form that it is for both medical and liability release.

**Photo Release**

BY CHECKING THIS BOX, I GIVE CONSENT TO IMMANUEL LUTHERAN CHURCH TO POST OR PUBLISH PHOTOGRAPHS OF MY CHILD AND SAMPLES OF MY CHILD’S WORK IN VARIOUS PUBLIC FORUMS SUCH AS THE CHURCH WEBSITE, FACEBOOK, & TWITTER. I UNDERSTAND MY CONSENT IS VALID FOR THE VACATION BIBLE SCHOOL 2019 UNLESS I REVOKE MY CONSENT PRIOR TO POSTING OR PUBLICATION, BY NOTIFYING THE CHURCH OFFICE IN WRITING

Once completed, email form to **immanueloffice@mymts.net**