

St. John's Church Vacation Bible School 2014 Registration Form

Check One:

- Participant (Entering Kindergarten – Grade 5)
 Team Member (Volunteer Over Grade 6)
 Middle School/Junior High
 High School
 Adult

Participant and Team Member/Volunteer Information:

Full name _____ Name on Nametag _____

Date of Birth: _____ Sex (circle one): M F

Grade Completed _____ Age _____

If you are coming with a friend, what is that friend's name? _____

T-shirt size (circle one): Youth S M L or Adult S M L XL

Participant Information (Entering Kindergarten – Grade 5)

Parent/Guardian _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Home church: _____ City _____

Emergency Contact Name _____ Emergency Contact Number _____

Special Needs/Allergies _____

Authorization & Release

I hereby give my permission for my child(ren) _____, to participate in Vacation Bible School at St. John's Church, 2401 College Avenue, Fort Worth, Texas 76110. I release all volunteers, teachers, aids, and sponsors of St. John's Vacation Bible School from any and all liability for any injury, accident, or other harm that may be sustained by my child as a result of his/her/their participation in Vacation Bible School. I also give my permission for the staff to administer any necessary first aid that may be required. I further give my authorization for the above-mentioned parties to seek medical attention for my child(ren) in the event of an emergency. Parents, please be aware your child(ren) may be photographed during the week of VBS. Photos will be used for St. John's Church's promotional purposes only.

Signature of Parent or Guardian _____

Date _____

Contact Lisa Estes for more information: lisa_m_estes@yahoo.com