

# Registration Form

(one form per family)

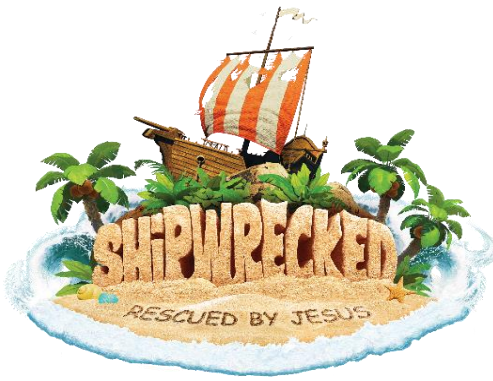
Monday, June 18 - Friday, June 22, 2018

8:30 - 11:30 am

Preschool: 4-5 yr olds

School Age: Kindergarten-5th Grade

VBS kids can be dropped off at 8:00 am.



Name of Parent(s) Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_  
 Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

### Contact Information

Home Phone: \_\_\_\_\_ Work: \_\_\_\_\_  
 Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### Home Parish

Name of Church: \_\_\_\_\_ City: \_\_\_\_\_

### Children Attending

Child's Name	Gender	Age	Date of Birth	Grade (in 2018/19)
_____	M F	_____	/ /	_____
_____	M F	_____	/ /	_____
_____	M F	_____	/ /	_____
_____	M F	_____	/ /	_____
_____	M F	_____	/ /	_____

### Allergies, other medical conditions or special education accomadations needed:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_



In case of emergency **at Vacation Bible**, Contact: \_\_\_\_\_

Phone number: \_\_\_\_\_

Tuition Fee: \$25/Child or \$75/Family of 4 or more

Amount due: \$ \_\_\_\_\_

Tuition Fee is waived if you volunteer to help as a Station Leader, Crew Leader or Crew Leaders aid.

Payment made by: Check #: \_\_\_\_\_

Cash: \_\_\_\_\_ Volunteer \_\_\_\_\_

## PHOTOGRAPH AND VIDEO CONSENT INFORMATION

Throughout the Vacation Bible School week we will be taking pictures and videos to use each day at the closing ceremony called Spotlight VBS. We would also like to use these photographs and videos in our parish bulletin, flyer or on our parish website. Names will not be posted with any of the photographs or videos.

Written consent of the parent/guardian is required.

If there are concerns about pictures or video, please contact Connie at 507-388-3766 or cwallin@sjwhf.org.

*I authorize and give full consent to publish any photograph or video in which my REGISTERED student(s) appears while participating in the Vacation Bible School program. There will be no compensation for use of any photograph or video at the time of publication or in the future.*

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**I would like to volunteer for the Vacation Bible School program -**

**FILL OUT VOLUNTEERS REGISTRATION FORM**