

**Maker Fun Factory: Created by God, Built for a Purpose**

**VBS Registration Form**

June 19-23, 2017 7:00-9:15 PM Lite Dinner: 6:15 PM

Parent Name \_\_\_\_\_

Parent E-Mail \_\_\_\_\_

Address \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Church Affiliation \_\_\_\_\_

Emergency Phone (\_\_\_\_) \_\_\_\_\_

**PERSONS AUTHORIZED TO PICKUP CHILD/CHILDREN**

1. Name \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Relation to child/children \_\_\_\_\_

2. Name \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Relation to child/children \_\_\_\_\_

**Medical Consent:** In order to meet legal requirements, I hereby authorize Crossroads Presbyterian Church VBS staff to administer any and all necessary medical care while my child/children/teen is/are in their custody.

Signed \_\_\_\_\_

Date \_\_\_\_\_

**Video Release**

I hereby give Crossroads Presbyterian Church permission to use photographs, video and audio of my child participating in our Vacation Bible School. This media is to be used only on the crossroads-pc.com website on a page requiring a password for the purpose of promoting Vacation Bible School and letting the members see all the activities in which the children are involved.

Agreed and accepted by: \_\_\_\_\_

**Register all individual family members on the next pages — children on the front, teens and adults on the back.**

**Parent Name** \_\_\_\_\_

**Nursery**(birth through 3 years)

Name \_\_\_\_\_ \_\_F \_\_M

Birthdate \_\_\_\_\_ Allergies \_\_\_\_\_

Name \_\_\_\_\_ \_\_F \_\_M

Birthdate \_\_\_\_\_ Allergies \_\_\_\_\_

**Children**(already 4 years old; Beginning Kindergarten to beginning 5<sup>th</sup> Grade August 2017)

1. Name \_\_\_\_\_ \_\_F \_\_M Grade just completed \_\_\_\_\_  
Birthdate \_\_\_\_\_ Allergies \_\_\_\_\_

2. Name \_\_\_\_\_ \_\_F \_\_M Grade just completed \_\_\_\_\_  
Birthdate \_\_\_\_\_ Allergies \_\_\_\_\_

3. Name \_\_\_\_\_ \_\_F \_\_M Grade just completed \_\_\_\_\_  
Birthdate \_\_\_\_\_ Allergies \_\_\_\_\_

4. Name \_\_\_\_\_ \_\_F \_\_M Grade just completed \_\_\_\_\_  
Birthdate \_\_\_\_\_ Allergies \_\_\_\_\_

5. Name \_\_\_\_\_ \_\_F \_\_M Grade just completed \_\_\_\_\_  
Birthdate \_\_\_\_\_ Allergies \_\_\_\_\_

**Parent Name:** \_\_\_\_\_

**Teen**(beginning 6<sup>th</sup> grade through 12<sup>th</sup> grade in August 2017)

1. Name \_\_\_\_\_ \_\_F \_\_M Grade just completed \_\_\_\_\_

Birthdate \_\_\_\_\_ Allergies \_\_\_\_\_

2. Name \_\_\_\_\_ \_\_F \_\_M Grade just completed \_\_\_\_\_

Birthdate \_\_\_\_\_ Allergies \_\_\_\_\_

3. Name \_\_\_\_\_ \_\_F \_\_M Grade just completed \_\_\_\_\_

Birthdate \_\_\_\_\_ Allergies \_\_\_\_\_

4. Name \_\_\_\_\_ \_\_F \_\_M Grade just completed \_\_\_\_\_

Birthdate \_\_\_\_\_ Allergies \_\_\_\_\_

**Adults**

Name \_\_\_\_\_ Name \_\_\_\_\_

Name \_\_\_\_\_ Name \_\_\_\_\_