

VACATION BIBLE SCHOOL JULY 10-14, 2017 - PARTICIPANT REGISTRATION 2017

**MARVELOUS MYSTERY: The Mass comes Alive**

**\* IMPORTANT to Complete**

Child's name \_\_\_\_\_ Child's Age \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
M D Y

Grade to be completed this June \_\_\_\_\_ (must have completed JK (4-year old Kindergarten) by June 2013)

Sex:(Circle one) M F T-Shirt Size: (Circle one) **Youth:** 6/8 10/12 14/16 **Adult:** Small Medium Large

Parent's Name(s) \_\_\_\_\_

\*Full **Mailing** Address (include postal code) \_\_\_\_\_

\*Telephone: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

\*Email Address: \_\_\_\_\_

Contact person (in case of emergency) \_\_\_\_\_ Phone # \_\_\_\_\_

Any food allergies, other allergies or medical concerns \_\_\_\_\_  
(Please continue on back)

Any behavioural concerns: Please note that one on one care is not possible in this program  
\_\_\_\_\_  
(Please continue on back)

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Food allergies, other allergies or medical concerns continued from front

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Behavioural concerns Continued from front:

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I understand that reasonable precautions will be taken to safeguard the health and well being of the participants in this VBS and that I will be notified as soon as possible in the event of an emergency. In the case of sickness or an accident, I authorize the consent of the VBS Team, or other associated volunteers of the VBS program to obtain medical care from a licensed physician, hospital, or medical clinic for my son/daughter in the event that myself or other legal guardian(s) cannot be reached. I hereby do release and forever discharge this Diocese, and Parish from all manners of actions, claims which I or the child named above, shall or may have any reason, arising during my child's attendance of the VBS.

Registration gives consent to allowing my child's image to be recorded, either by photograph or video, to be on a CD/DVD distributed to all families of this year's VBS, on the parish website (group activity shots), and used during the VBS week or for future advertisement of Parish VBS programs. Any other use will require your further consent.

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Parent/Guardian Signature

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Date

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