

Exeter Bible Fellowship
VBS 2022 Registration Form

August 15-18 2022 9:30 a.m. to 12:00 daily

CHILD'S NAME: _____ AGE: _____

BIRTHDATE: _____ HEALTH CARD # _____

FOOD/MEDICAL ALLERGIES _____

OTHER INFORMATION WE SHOULD
KNOW: _____

PARENT/GUARDIAN NAME: _____

PHONE #: _____ CELL: _____ WORK: _____

EMAIL ADDRESS: _____

ADDRESS: _____

HOME CHURCH (if applicable) _____

EMERGENCY CONTACT: _____ PHONE: _____

WAIVER, MEDICAL PERMISSION and PRIVACY DISCLOSURE STATEMENT

(Please Read Carefully)

I understand that, while the teachers, helpers and leaders of Exeter Bible Fellowship VBS will take precautions to ensure the safety of all children while they are at Vacation Bible School, I will not hold them liable for any injury or cost incurred by injury during the activities of VBS;

I acknowledge that it is my responsibility to advise Exeter Bible Fellowship VBS of any medical or health concerns of my child that may affect his/her participation in the activities of VBS;

I authorize the ministry staff of Exeter Bible Fellowship VBS to sign consent for medical treatment and to authorize any physician or hospital to provide medical assessment, treatment or procedures for the participant named above.

I understand that the contact information collected on this form may be used by Exeter Bible Fellowship to invite me/us to future events and activities of the congregation;

Photos and videos taken of VBS activities and participants may be displayed in the church, on the internet, and/or used for promotional purposes outside of the church. No personal names or other private information will be published without consent.

I HAVE READ THE ABOVE AND AGREE TO THE CONDITIONS.

Signed on the _____ day of _____, 2022.

Signature of Parent/Guardian: _____

Please Print Name: _____

During in person registration Aug 15, 2022 you will be asked to sign a copy of this form.