



## VBS and Summer Camp Registration Form

Camper's Name: \_\_\_\_\_

Birthdate \_\_\_\_\_ Grade entering in 26-27 \_\_\_\_\_

Special Needs/Allergies/Medical Information: \_\_\_\_\_  
 \_\_\_\_\_

This program is available to Children entering grades Kindergarten through 5th grade

\_\_\_\_ \$35 Half day option 9-12:30 - includes a morning snack & lunch  
 \_\_\_\_ \$130 All day option 9am-4pm - VBS in the morning and camp in the afternoon includes morning snack, lunch, afternoon snack, activities and 3-4 field trips throughout the week. (drop off 8:45-9am)

T-shirt Size (All Day Campers Only) \_\_\_\_\_

Parent/Family/Guardian Name \_\_\_\_\_

Address \_\_\_\_\_

Email address \_\_\_\_\_

Phone Numbers: Cell \_\_\_\_\_

Work \_\_\_\_\_

Emergency Contacts:  
 Name \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Name(s) of person(s) who may pick this child up from VBS or camp:

**Please read the following information and sign below:**

**General:** I give my consent for my child to attend meetings, activities, and events, both on site and offsite. I will be provided specific event information in advance of any activity that will be taking place off-site.

**Photo Release:** New Promise Church/VBS has my permission to use my child's photograph publicly in VBS materials. I understand the images may be used in print publications, online publications, presentations, websites and social media. I also understand that no royalty, fee, or other compensation shall become payable to me by reason of such use.

**Medical Release:** In the event of a medical emergency and when contact cannot be made in a timely manner to me and or the emergency contact listed, I give my permission for my child to receive appropriate medical attention. In the event of an unforeseen emergency or accident, I release New Promise Church, its employees, volunteers and all those related to it, from any liability.

**Transportation:** Should transportation be needed, I agree to allow my children to ride with group leaders, another staff member, a volunteer of the church, a parent or a private transportation company. Appropriate safety standards will be maintained and my children will always be provided seatbelts. If no such permission is granted, I agree to transport my child to and from any offsite event.

I agree with the above releases:

**Parent/Guardian Signature** \_\_\_\_\_  
 \_\_\_\_\_ Date \_\_\_\_\_