2024 First Christian Church SCUBA Vacation Bible School Registration Form

Child's Information (please fill out one form per child):

- Child's Name: ______
- Age: _____ Date of Birth: _____
- Grade (completed): _____
- Allergies/Medical Conditions/food aversions: ______

Parent/Guardian Information:

- Parent/Guardian Name: ______
- Address: ______
- Phone Number: ______
- Email Address: ______
- Is there anyone else you give permission to transport your child to or from VBS?

Emergency Contact:

- Name: _____
- Phone Number: ______

Additional Information:

- How did you hear about our Vacation Bible School? ______
- Would you like to receive our monthly newsletter to keep you informed of events?

Photo Release Consent:

I hereby give permission to First Christian Church of Canton, IL to photograph, videotape, and/or audio record my child, named above, during Vacation Bible School activities. I understand that these materials may be used for promotional purposes, including but not limited to newsletters, social media, and the church's website.

 $\hfill\square$ Yes, I give permission for my child's photo/video/audio to be used.

□ No, I do not give permission for my child's photo/video/audio to be used.

Parent/Guardian:		Date:
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Thank you for registering for Vacation Bible School! We will be in touch soon!