

St. John Evangelical Lutheran Church (High Steeple)

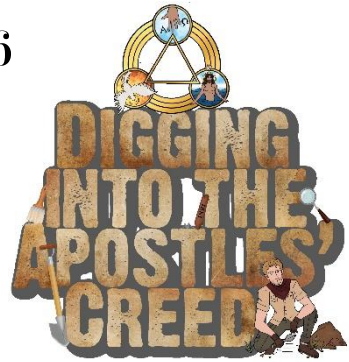
119415 Huckleberry St, Edgar, WI 54426

- VBS Registration Form -

Monday, July 22 – Friday, July 26, 2024. 9:00am - 12:00pm

Kids ages 3 Years – going into 6th Grade

One Form Per Family



Name: First and Last _____

Birthdate

Age

Grade Completed

_____	____/____/____	____	____
_____	____/____/____	____	____
_____	____/____/____	____	____
_____	____/____/____	____	____

Parent/Guardians: _____

Complete Address: _____

Home/Cell Phone: (____) _____ Cell/Work Phone: (____) _____

Home Church: _____

Any Allergies Children Have: _____

Medical Issues/Special Needs: _____

Emergency Contact (Name, phone #): _____

Extra Information: _____

Medical Release: I give my permission for the VBS staff to administer basic first aid to my child(ren) (named above) in the event of an injury. I understand that the VBS staff will contact emergency services in the event of a significant injury and all expenses for such emergency services will be paid by me.

Photo Release: I hereby grant the above named church permission to copyright and use photographs/videos taken at VBS of the minor(s) designated above in any manner or form for any purpose lawful at any time. I waive any right that I may have to inspect or approve the finished product or written copy, that may be used in conjunction therewith, or the use to which it may be applied.

Permission to Attend: I give permission for my child(ren) (named above) to attend the Vacation Bible School (VBS) listed above.

Parent Signature

Date