



VACATION BIBLE SCHOOL REGISTRATION ~ ALL ARE WELCOME!

Friday 5pm program & meal **Date:** July 26th – July 30th, 2021
Finale: Meal donated by Classic Cafe **Time:** 2:00pm-5:00pm
Location: Start & Finish daily at Malvern UMC
 Wednesday & Thursday we'll take the Rocky Railway (a.k.a. school bus) to Strahan UMC. Pre-k will remain at MUMC.
Ages: PreK-4th grade (5th & up my attend as helpers).

Registrations on first come, first serve basis – we nearly reach max capacity every year! ☺
 Turn in registrations where you found them, or take a photo and text to Jill at 402-650-4237

PARTICIPANT REGISTRATION

Name: _____ DOB: _____ Grade Completed _____
 Name: _____ DOB: _____ Grade Completed _____
 Name: _____ DOB: _____ Grade Completed _____
 Address: _____
 Phone #: _____ Email: _____

You may reach us by: Text (at # above or provide here: _____)

Parent(s) Name(s): _____
 Person(s) authorized to pick up child(ren): _____
 Home Church & School: _____

VOLUNTEER REGISTRATION (Current 5th graders & up - junior crew leaders, station crew, etc):

Name: _____ Grade Completed: _____ OR Adult _____
 Name: _____ Grade Completed: _____ OR Adult _____



In case of emergency, contact : _____
Name and phone number

Allergies or other medical conditions (note child's name): _____

Malvern & Strahan UMC 2021 VBS: Permission/Liability/Medical Release Form

For families with multiple students, please list names of all students attending in the blanks below

As parent or legal guardian of:

I have reviewed the information about and give my permission for the subject of this **release to be involved in the overall activities** of the event.

I understand that in the event **medical intervention** is needed, every attempt will be made to contact immediately the persons listed on this form. In the event we cannot be reached in an emergency during the event listed on this form, I hereby give my permission to the physician or dentist selected by the event leader to hospitalize, to secure medical treatment and/or to order an injection, anesthesia, or surgery for my child as deemed necessary.

I understand that all reasonable safety precautions will be taken at all times by the Church and by its agents during this event. I understand the possibility of unforeseen hazards and know the inherent possibility of risk. **I agree not to hold Malvern or Strahan United Methodist Church, East Mill CSD, its leaders, employees, and volunteer staff liable for damages, losses, diseases, or injuries incurred by the subject of this form.**

Signature of Parent/Guardian of above listed student(s): _____ Date: _____

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Travel Consent:

I consent for travel via East Mills CSD school bus on Wednesday & Thursday to Strahan UMC.

YES _____ NO _____

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Media Consent:

I consent to the use of any video images or photographs (digital or conventional) that may be taken of the subject of this release during these events to be used, distributed, or shown as the church sees fit. YES _____ NO _____

Signature of Parent/Guardian of above listed student(s): _____

Date: _____