

COMMUNITY VACATION BIBLE SCHOOL 2021 REGISTRATION FORM

(One Form Per Child Please)

Paid _____ Scholarship _____

Child's Last Name: _____ Child's First Name: _____

Last Grade Completed: _____ Birthday: ____/____/____ Age: _____

Parent or Guardian Name(s):

Home Street Address:

(Street, City, State, Zip)

Home Mailing Address:

(Street or PO Box, City, State, Zip)

Daytime Phone: (____) _____ Evening Phone: (____) _____

Email: _____

Does this child have any medical condition(s) that we should be aware of such as medications, allergies, etc.?

No _____ Yes _____ If yes, please explain:

Dismissal & Emergency Contact Information

If the parent or guardian listed above is not available, who else may be contacted in an emergency and/or has permission to pick-up this child?

Name: _____ Phone: (____) _____ Relationship: _____

Name: _____ Phone: (____) _____ Relationship: _____

Church Affiliation/Membership: _____

I understand that by registering, I am giving permission for my child/children to participate in ALL activities offered (i.e., Bible study, worship services, off-site trips, arts & crafts, music, science, recreation, games, movies, meals & snacks, etc.). If I have specific concerns about activities that I may not want my child/children to participate in, it will be my responsibility to check with the leaders on when such activities of concern will be offered and to remove my child/children during that time and offer an alternative activity.

Most activities are done in a group situation. I understand that my child/children is/are expected to be on their best behavior and to follow all instructions and rules as given by the Vacation Bible School leaders and volunteers. You agree and consent to your child's personal belongings (cell phone, backpack, lunch sack, purse, etc.) may be searched if there is a credible threat to the safety or wellbeing of any individual or the group. If you or your child/children experience a problem or have concerns, please contact one of the leaders immediately to discuss so the situation can be resolved quickly. By signing you understand and agree that should there be a discipline problem, corrective measures may include verbal reprimands, time out or separation from the group, or assignment to an adult volunteer for 1-on-1 supervision. If after these measures have been taken and the child/children is/are still uncooperative or if the problem is severe and causing distress to the leaders or the other children in the group, the parent/guardian will be called for the child/children to be picked up immediately. For more severe discipline situations, the leaders may request a meeting with the parents/guardians before the child can rejoin the group.

I understand that the Norris area churches hosting this Vacation Bible School, as well as all leaders, and volunteers, have made every effort to provide a safe environment. If a child requires medication (prescription or nonprescription) or special medical equipment, this must be checked in daily with a volunteer for safe keeping during program activities. Exceptions may be made on a case-by-case basis depending on the need and as negotiated with the leaders. The volunteer will administer and document any medicine given as directed by the parent or guardian on this form.

If an emergency medical situation arises, I give full permission for the leaders and volunteers to administer first aid treatment to my child/children who are participating in program activities. If the situation is beyond basic first aid, I also give permission for the leaders and volunteers to seek immediate professional medical care for my child/children including transportation to the nearest clinic or hospital as appropriate. Parents or guardians will be notified of medical emergencies as soon as possible and kept informed until they can arrive. While it is not necessary to provide a copy of medical insurance cards or a complete detailed medical history, if you child/children has a special medical condition which may require professional treatment, it may be helpful for leaders and volunteers to have this information on hand so medical providers can have it immediately in the case of an emergency. I have provided all necessary information about any specific health conditions my child/children may have.

I understand that there are certain risks in travel and the other activities which are offered as part of participating in this program and I fully accept those risks and agree to my child/children participation. These risks included, by are not limited to injury, physical injury, damage to personal property, and disease. I understand that some of these risks are known and some are unknown and that the leaders and volunteers have done their best to provide a safe and fun environment. I acknowledge that the Norris area churches hosting this event, the leaders, and the volunteers are not responsible for any harm or injury that might occur during the course of this program.

I fully release and discharge the Norris area churches hosting this event, the leaders, and the volunteers from all liability in connection with my child/children participation in this event.

Parent/Guardian: _____ **Date:** _____

COMMUNITY VACATION BIBLE SCHOOL 2021 BEHAVIOR COVENANT

Any time a group of children gather, despite best intentions, there are opportunities for inappropriate behavior and times when discipline must be enforced. The following rules are intended to ensure safety, physical and mental well-being, organized travel, and peaceful co-existence for the entire group. Please take a few minutes to discuss these rules and appropriate behavior for attending the activities during Vacation Bible School.

1. Treat everyone with respect. This means our group, chaperones, all others encountered during our trips. Obey and comply with all decisions and instructions whether given by the leader or volunteer. Remember, we are presenting our churches and the Norris community. Make us proud!
2. No inappropriate or foul language or gestures will be tolerated.
3. Bullying, verbal harassment, physical harassment, and sexual harassment will not be tolerated by our children or against our children.
4. Remain with our group and adult leaders at all times. Do not leave an area without an adult leader.
5. Each participant must wear the issued wristband throughout the entire trip. This is your identification with our group. If lost, there will be a \$5 reissue fee.
6. The use of cell phones (talking, texting, taking pictures), iPods, mp3 players, handheld video games, etc., is not allowed during our programs. Your child is welcome to bring a cell phone to the session, but it must be completely turned off (not on vibrate). If any of these things are brought and used, the leader and volunteers will take possession of the device(s) and they will be returned at the end of the day. If an electronic device is brought, is the responsibility of the child to keep up with it. Leaders and volunteers are not responsible for lost or stolen devices.
7. If a child sneaks off alone or in a group without an adult, that child/those children will be assigned a personal adult leader for the remainder of the day.
8. If a leader or volunteer asks a child to do something more than three times and the child refuses to comply, the child will be dismissed from all activities for the remainder of the day.

Violation of these rules may result in the parent/guardian being contacted to come pick-up the child immediately. If you are contacted to pick-up your child, it is expected you will pick-up the child within 30 minutes locally or 1 hour if off-site.

Parent/Guardian Signature: _____ **Date:** _____

2021 VACATION BIBLE SCHOOL

CONSENT PHOTO & VIDEO RELEASE FORM

Hosted by the following churches in Norris, Tennessee:

***St. Francis Episcopal, Norris Religious Fellowship,
Norris United Methodist, and St. Joseph Catholic***

Please fill out and sign the appropriate statement to **give** permission to use pictures and video of you and/or your minor during online services, emails, online and print newsletters, social media, website, etc. With regard to the use of photos and videos, children and adults may be identified individually or as a family unit by name or by their church affiliation. Please note that these photos and videos will be used now and we reserve the right to use them in the future.

**Each person in your family (minor or adult) who participates in our programs and activities
MUST have this form filled out completely and signed.**

Please return completed forms for each person/family by Tuesday, July 20, 2021.

Family Name: _____ Phone: (_____) _____

Email: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

The undersigned **GRANT** permission to St. Francis Episcopal Church to publish pictures & videos of myself and/or the minor named below in online worship services, emails, online and print newsletters, etc. If signing for a minor, I further state that I have the right to give this permission to the minor named above as I am the minor's parent or legal guardian. I understand that if I give notice to St. Francis Episcopal Church that I object to any particular picture or video used online services, email, on the website, etc., that it will be removed as soon as possible.

Printed Name of Participant: _____

Signature of Participant: _____ Date: _____

If Under 18, Parent's Signature: _____ Date: _____

Printed Name of Participant: _____

Signature of Participant: _____ Date: _____

If Under 18, Parent's Signature: _____ Date: _____

