

Vacation Bible School Registration

China Baptist Church

Child's name _____ One form per child, please

Grade entering _____ Birthday _____

Parents' names _____

Home address _____

House Number and Street

Town

Zip Code

Mailing address _____

Home phone _____ Alternate phone _____

Emergency contact person _____ Relationship to student _____

Home phone _____ Alternate phone _____

Food allergies Y N (List:) _____

Medical concerns Y N (Explain:) _____

Family doctor _____ Doctor's phone _____

Siblings attending VBS (names and ages) _____

Church affiliation _____ Church membership at _____

People who may pick up the child _____

Leaders of Vacation Bible School documents your child's VBS experience through the use of technology. We use these images for a variety of reasons and request your permission before

we can use you or your child's image outside of the classroom environment. Please note, pictures or videos may be used longer than the current year.

I give permission for my and my child's image to be used only for the following purposes:

1. In the China Baptist Church electronic and printed information.

Circle one: Yes No

2. In any similar/related collaborative partners electronic and printed information.

Circle one: Yes No

3. On the China Baptist Church and collaborative partner web sites.

Circle one: Yes No

4. In media articles and broadcasts (newspapers, television).

Circle one: Yes No

5. In group images that may be shared with other families.

Circle one: Yes No

I also understand that confidentiality issues arise when taking pictures/videos at program events that include images of children other than my own and/or staff. To the best of my ability, I will focus on capturing images of my own child/children and/or request permission when taking photographs/images of other children.

I am the parent/guardian of _____ I give permission for use of my and my child's image as indicated above.

After a brief VBS session our closing activity on Friday, August 2, 2019, for parents and children will be swimming with a life guard in attendance and a picnic at our Church Park. My child _____ has permission to attend this event.

Parent/Guardian

Signature _____

Date _____

For Pre-K and K Class Only:

I _____ hereby give permission for Sharon Farris or
the assistant to the Pre K-K class to support my child _____

In their toileting needs as well as to change diapers as applicable. Privacy will be provided and
assistance to those who are toilet trained as needed. Please let us know if there are any
special needs your child requires in the space provided below.

Parent/Guardian Signature _____

Date _____