2023 Registration Form	Sun, July 23rd—Tues, July 27th Snack: 5:30pm –6:00pm
<image/>	VBS: 6-8:30pm 3yrs (if parent stays)–6thGrade (just completed) <u>www.LutheranChurchScottCity.org</u> Location: Eisleben Lutheran Church 432 Lutheran Lane, Scott City (Office Use Box) Crew Leader: Circle Daily Attendance: S M T W R
Student Name	Age
Gender: Birth date	Grade completed spring of 2022:
Student Home Address :	
City / State:	Zip
Student E-mail Address:	Student Cell Phone:
Name of a special friend your child might like to be wit	h:
Names of Legal Parent/Guardian 1	
Names of Legal Parent/Guardian 2	
Parent/Legal Guardian (s) Home Addresses: (if differen	t than above):
Parent/Legal Guardian E-mail Address:	
Parent(s)/Legal Guardian(s) must be reachable by pho	one during the hours of VBS.
Phone Numbers: Cell:	Home:
Secondary Emergency Contact Name, Relationship & P	hone #
face to face. Only Legal Guardians listed above will ha	bove check in and check out with each child's "guide" ve pick-up & drop-off permission unless specified in nd from VBS on bike or foot?:
Location where a parent/legal guardian expects to be c	luring the hours of VBS:
Name of church you currently attend:	
How did you hear about our Vacation Bible School? _	
publicly. I understand that the images may be used in p	e) have my permission to use my or my child's photograph print publications, online publications, presentations, web- y, fee or other compensation shall become payable to me,

Page 1 of 2... Continue on other side

## **EMERGENCY INFORMATION & BEHAVIOR EXPECTATIONS**

In case of emergency, attempts will be made to contact the registered parent(s)/guardian(s) by the VBS leadership. While your student attends VBS, parents/guardians MUST be accessible at one of the phone numbers that have been listed. A call to 911 will be made in case of emergency.

Student's Name:		
Doctor's Name:	Phone# :	
Dentist's Name:		
.,	nd healthy, please list the students special needs, medical or helpful considerations:	
Allergies and food restrictions: Hospital Preference:		

## Participant Behavior Expectations:

Our main objective for VBS is to share God's love!

In order to provide a safe environment for your student and others, we have the following rules:

- Show respect for others
- · Keep hands, feet, and objects to yourself
- · Be a good listener
- Follow directions the first time they are given
- **Discipline Policy:** Disruptive and aggressive behavior will not be tolerated. If there is a problem, the student will be removed from the activity, placed in a time-out area, until they can resume activity without disruption or aggressive behavior. The parent/guardian of the student will be notified at the end of the day's VBS session unless the student is unable to gain self-control in which case we will call listed parents/guardians to pick up the student.

## Permission & Consent Authorization

١, _	, being the parent and/or legal guardian
	of, understand and agree to the use of the behavior expectations
	and discipline policy listed above. I will state the expectations to my student prior to participating and
	support it. I give my consent for the use of basic first aide by our staff/volunteers in case of minor
	injury and permission to seek additional emergency medical treatment in my absence. I understand
	that in such case reasonable attempts would first be made to contact me, time and conditions
	permitting and that I am responsible for all costs incurred for his/her injury and treatment.
SI	GNATURE: DATE:

Printed Name:

RETURN YOUR COMPLETED REGISTRATION FORM TO THE CHURCH OFFICE.

Page 2 of 2... Continue on other side