



St. Mary Catholic Church Vacation Bible School

Registration Form

Please return the completed form by: June 7, 2017. Forms may be dropped in the collection basket, at the Church office, or mailed to St. Mary Church 220 North 2nd Street, Paragould.

Date: June 19-23
Time: 8:00a.m. - 11:00a.m.
Location: St. Mary Parish Hall
Ages: Children entering grades Kindergarten - 6th

Name: _____

Sex (Circle One) Male / Female Age: _____ Grade Completed: _____

T-Shirt Size: (Circle One) Child: X-Small Small Medium Large
Adult: Small Medium Large

Allergies or medical conditions: _____

Family Information:

Parents/Guardian Name: _____

Address: _____

Phone Number: _____

Email: _____

Emergency Contact

Name: _____

Phone Number: _____

I understand that reasonable precautions will be taken to safeguard the health and well-being of the participants in this VBS and that I will be notified as soon as possible in the event of an emergency. In the case of sickness or an accident, I authorize and consent the VBS Team, or other associated volunteers of the VBS program to obtain medical care from a licensed physician, hospital, or medical clinic for my son/daughter in the event that myself or other legal guardian(s) cannot be reached. I hereby do release and forever discharge the Diocese, and Parish from all manners of actions, claims, which I or the child named above shall or may have for any reason, arising during my child's attendance of the VBS. Unless other written instruction is submitted, I also consent to allowing my child's image to be recorded, either by photograph or video, and used during the VBS week or for future advertisement of Parish VBS programs. Any other use will require your further consent.

Parent/Guardian Signature: _____ Date: _____