



# 2018 Vacation Bible School Participant Registration Form

July 30th- August 3rd, 9 am – 12 pm Daily  
Parish Activity Center



## Child's Information

**Camper**

**Helper**

(please circle one)

Name: \_\_\_\_\_

Gender: (circle one) M F Age: \_\_\_\_\_ Grade completed: \_\_\_\_\_

T-shirt size: (circle one) child sizes: XS S M L / adult sizes: S M L XL

Allergies or medical conditions: \_\_\_\_\_

## Family Information:

Parents/Guardians' Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

Hm Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_

## Emergency Contact:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

### **Please have Registrations in NO LATER THAN JULY 9TH!**

Fee: \$30 per camper- Includes VBS TSHIRT and all Materials, Crafts, and snacks for the week (no fee for helpers)

Extra, Not Required:

\_\_\_\_\_ VBS CD (includes all songs taught during the week) \$10

Any questions or for more registration forms, please contact Michelle Cochran: [Michelle@ChristTheKingNH.org](mailto:Michelle@ChristTheKingNH.org)

***Please make checks out to Christ the King Parish. Drop off or mail in Registration & Payment to:  
Christ the King Parish, Attn: VBS | 72 S Main St | Concord, NH 03301***

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 this 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