



2018 VBS Registration Form Bluffton Community Vacation Bible School

First United Methodist Church

116 Church Street

Sunday, July 22, 2018, thru Thursday, July 26, 2018

6:00PM - 8:00PM

Children who are age 4yrs by July 1st, 2018 through 5th Grade

Parent/Guardian Name _____

Address _____

Telephone Numbers: Home _____ Cell _____

Email _____ Church (if applicable): _____

Emergency Contact/Telephone: _____

1. **Child's Name:** _____

Date of Birth: _____ Grade Completed: _____

Allergies or Other Medical Conditions: _____

2. **Child's Name:** _____

Date of Birth: _____ Grade Completed: _____

Allergies or Other Medical Conditions: _____

3. **Child's Name:** _____

Date of Birth: _____ Grade Completed: _____

Allergies or Other Medical Conditions: _____



Bluffton Community Vacation Bible School 2018

Consent for Medical Transport and Treatment of a Minor Child(ren)

In the event of an emergency or non-emergency situation in which medical treatment is required every reasonable effort will be made to contact the persons listed on this form. If unsuccessful in contacting the persons listed, consent/permission is given for transportation and treatment by competent medical personnel. I realize that I may be billed for such services and understand that if I do not have medical insurance coverage that I am responsible for the payment of any medical bills.

Release of Liability

I am the parent/legal guardian of the child(ren) listed above and I consent to each child's participation in this year's Bluffton Community Vacation Bible School program and assume all risks associated with their participation. Furthermore, for myself and child(ren), I waive and release all claims of any kind or of any nature that may arise from activities and hold harmless the representatives, volunteers, staff and churches associated with 2018 Bluffton Vacation Bible School and hold them harmless. I grant permission for photographs of my child to be taken and used during the program.

I agree to the above statements or have noted objections above:

Parent/Guardian Signature: _____

Date: _____