

# VBS 2017 Registration Form

Participant(s) must be 3 years old (by June 1<sup>st</sup> AND potty trained) through 5<sup>th</sup> grade.

#1 Child's Name \_\_\_\_\_ Birth Date \_\_\_\_\_ Group \_\_\_\_\_

Allergies/Med \_\_\_\_\_ Tshirt size \_\_\_\_\_

#2 Child's Name \_\_\_\_\_ Birth Date \_\_\_\_\_ Group \_\_\_\_\_

Allergies/Med \_\_\_\_\_ Tshirt size \_\_\_\_\_

#3 Child's Name \_\_\_\_\_ Birth Date \_\_\_\_\_ Group \_\_\_\_\_

Allergies/Med \_\_\_\_\_ Tshirt size \_\_\_\_\_

Parent's Name \_\_\_\_\_

Address \_\_\_\_\_

Email Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Number \_\_\_\_\_

Physician Name and Number \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_

Emergency Phone Number \_\_\_\_\_

The following person(s) are authorized to pick up my child:

\_\_\_\_\_

***\*Please inform the person picking up your child that they must show ID***

I understand that by registering my child for this event, I agree that I hereby expressly give permission for First Baptist Church of Tucker to use my child's name and/or image and/or video footage for the website and/or for promotional materials to be used by First Baptist Church of Tucker.

I also give my permission to First Baptist Church of Tucker to have my child medically treated in any emergency situation. I also release First Baptist Church of Tucker from any liability in connection with my child's participation in the activities of First Baptist Church of Tucker.

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

### OFFICE USE ONLY:

	Monday	Tuesday	Wednesday	Thursday	Friday
Sign In	_____ Initial	_____ Initial	_____ Initial	_____ Initial	_____ Initial
Sign Out	_____ Initial	_____ Initial	_____ Initial	_____ Initial	_____ Initial