

# Vacation Bible School Summer 2018



**June 11(Mon.) – June 14 (Thurs.)**

Drop-off: 8:45am Pick-up: 11:45am

Ages: 4 (or turning 4 by Sept 1) to 5<sup>th</sup> Grade

Covenant Presbyterian (4000 Ridgewood Road)

**Deadline: May 27th**

PLEASE PRINT CLEARLY AND FILL OUT COMPLETELY

\_\_\_\_\_  
Father Full Name (*print clearly*) Cell Phone

\_\_\_\_\_  
Mother Full Name (*print clearly*) Cell Phone

\_\_\_\_\_  
Father's Email Mother's Email

\_\_\_\_\_  
Street Address (*please print*) City State Zip

\_\_\_\_\_  
Alternate person(s) authorized to pick up children below. *Must be able to show photo ID!*

## Child Registration Form

*Multiple children must live in the same household and under the care of the same parent/guardian.  
All other children must be listed on a separate form, to be accompanied with this form.*

1) \_\_\_\_\_ M / F \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Child Name Sex Age D.O.B Grade Entering in 2018  
\*\*Food Allergy? Circle One: Yes No Specific Allergy: \_\_\_\_\_

2) \_\_\_\_\_ M / F \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Child Name- Sex Age D.O.B Grade Entering in 2018  
\*\*Food Allergy? Circle One: Yes No Specific Allergy: \_\_\_\_\_

3) \_\_\_\_\_ M / F \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Child Name- Sex Age D.O.B Grade Entering in 2018  
\*\*Food Allergy? Circle One: Yes No Specific Allergy: \_\_\_\_\_

.....

**CONTACT INFORMATION:**

COVENANT PRESBYTERIAN – 601.981.7236  
Lisa Ireland - children@CovenantPresJackson.org  
ADDRESS: 4000 Ridgewood Road, Jackson, MS 39211

**CONSENT FOR PARTICIPATION IN VBS ACTIVITIES, AND RELEASE FROM LIABILITY.**

**Consent and Release.** I/we hereby grant permission for my/our child or children listed on this form to participate fully in all Covenant Presbyterian Church 2017 Vacation Bible School (“VBS”) activities and programs. I/we specifically release Covenant Presbyterian Church and its officers, employees, and volunteers from any and all liability as to any right of action or claim to relief, including negligence, that may accrue either to me/us or our child or children for any injury or damage that my/our child or children may suffer while participating in activities and programs of Covenant’s VBS.

**Photo Authorization.** I/we authorize Covenant Presbyterian Church to use my child’s image in photographs, videos, or other digital images from VBS activities in print, electronically, or on websites.

**Authorization for Alternate Person to Pick Up Child/Children.** I/we authorize Covenant Presbyterian Church to release my/our child or children to any person listed on this form as an alternate person authorized to pick up children.

**Child Behavior Agreement.** I/we also agree that in the event my/our child or children contravenes the activity rules, instructions, or regulations of the adult leaders in charge, I/we will drive to the site of the activity to bring my/our child or children home.

**Child’s Health Agreement.** My/our child or children are in good physical condition at the present time, and has (have) not had any serious illness or operation since the last examination by a physician. If my/our child is not well at the time of any activity of Covenant’s VBS, I/we will not let my child attend.

**Statement on Allergies.** My/our child is allergic to the following medicine, food, plant, animal, or insect toxin (if multiple children are listed on form, identify which has the allergy):

---

—

---

—

---

**Request for and Agreement to Pay for Medical Treatment.** In the event of illness or accident in the course of any Covenant VBS activity or program, I/we hereby request and authorize such medical personnel as selected by the adult leaders in charge to institute without delay such measures as the judgment of the medical personnel dictates for the health of my/our child. I/we agree to pay for all medical care given to my/our child. I understand that if time allows, VBS personnel will try to contact me, but may not be able to do so.

---

FATHER'S SIGNATURE	DATE	MOTHER'S SIGNATURE	DATE
(Both parents to sign.)			

---

FATHER'S NAME (Please Print)	MOTHER'S NAME (Please Print)
------------------------------	------------------------------

# PARENT INFORMATION

- **Drop-Off:** Please park and bring your child(ren) inside to sign in, get a name tag, and meet their teachers. Doors open at 8:45. If you arrive after 9:00, please bring your child to the Fellowship Hall for opening assembly.
- **Pick-Up:** Please park and pick-up your child(ren) from their classroom. Unauthorized persons will not be allowed to pick up children. Parents or other guardians should be prepared to show an ID.
- **Mission Project:** Each day we will be taking a mission offering. Please encourage your children to dig into their piggy banks to support our mission!
- **Wednesday Family Cookout:** Join us for a family cookout at 5:30pm on Wednesday, June 13. We'll have an inflatable obstacle course, a water slide and food for all! ***Please fill out the reservation below and give to your child's teacher.*** The children should wear bathing suits and bring towels.

We are so happy to have your children here at Covenant Presbyterian Church's Vacation Bible School!

✂-----

**Family Cookout Reservation**  
**Wednesday, June 13<sup>st</sup> at 5:30pm**  
**Family cookout and water slide inflatables!**

\_\_\_\_\_ YES! We'll be there with \_\_\_\_\_ kids and \_\_\_\_\_ adults.

\_\_\_\_\_ NO, we cannot attend.