



2017 Vacation Bible School Registration Form Good Shepherd Lutheran Church

Passport to Peru VBS August 7 - 11, 2017 9:00 to Noon daily

Child's Name: _____

Parent or Guardian: _____

Address: _____

City: _____ State: _____ Zip: _____

Parent/Guardian Email Address: _____

Telephone: _____ Home Church: _____

Grade child will be entering in the fall (must be 4 by the fall up to entering grade 3): _____

Current age _____

Allergy/Medications/Medical Needs (list all): _____

Health Insurance Policy Number: _____

Family Doctor: _____ Phone No.: _____

Emergency Contact (name): _____

Emergency Contact (phone): _____

To whom shall your child be dismissed after VBS each day?: _____

In the event of an emergency, every effort will be made to contact the parent or guardian at the above number. I hereby give my permission to the VBS staff to authorize proper medical care until such time as I can be contacted.

(Parent or Guardian): _____

REGISTRATION: Fee for the program is \$35 per child (\$85 maximum per family). A separate form is needed for each child. Forms are available in the May Voice and online at www.qspr.org. Make checks payable to *Good Shepherd Lutheran Church*. Payment must accompany form in order to process registration. Church members are urged to register as early as possible as registration is on a "first -in" basis. This program will be open to the public after May 15th.

Forms may be mailed to the church (112 North Main St. Pearl River, NY 10965) or left in Lisa Holliday's mailbox in the counting room. Questions? E-mail lisa@qspr.org. **BE SURE TO FILL OUT PHOTO RELEASE FORM AS WELL.** Registration will be confirmed by end of June.

Picture Release Form Good Shepherd Lutheran Church

IF THE PARTY is 18 years old or older, complete the following down to the Consent section; otherwise, the parent or legal guardian must also sign.

I, _____, give Good Shepherd Lutheran Church (GSLC), its assigns, licensees, and legal representatives the irrevocable right to use my picture, portrait or photograph in all forms and media and in all manner, for the advertising, trade or in any other lawful purpose for the benefit of Good Shepherd Lutheran Church only. I hereby forever waive any right to inspect or approve the finished product, including but not limited to, written copy and/or an image in print or on the web site, which may be created in connection therewith. I am eighteen (18) years of age or older. I understand that GSLC cannot control the unauthorized use by persons other than Good Shepherd, of my image once such image is published. Any claim I may have concerning unauthorized publication of my image must be pursued by me against the unauthorized user. Good Shepherd disclaims any responsibility for such unauthorized use of my published image.

I have had sufficient time to review and seek explanation of the provisions contained above, have carefully read and understand them, and agree to be bound by them. I voluntarily and irrevocably give my consent and agree to this Release and Waiver.

Executed this _____ day of _____, 20_____.

Signature _____ Witness _____ Phone _____
Address _____
City, State, Zip _____

Consent

If person is under the age of 18, his or her parent or legal guardian must also sign.

I, _____, am the parent or legal guardian of the person listed above. I have read and understand the provisions of this document, I consent to the person participating as described above, and I fully enter into and agree to the above Release and Waiver and forever waive any rights there from.

Parent/Guardian Signature _____
Date _____
Address: _____
City, State, Zip _____
Phone _____