

Hastings Baptist Church VBS "Under Construction" Registration Form

Number of People attending

Student(s) Name(s): _____

Grade(s) Entering _____

DOB(s) _____

_____ Sunday, August 1

_____ Monday, August 1

_____ Tuesday, August 1

_____ Wednesday, August 1

_____ Thursday, August 1

Registration for dinner August 1
11th. Children must be accompan

Address _____

City _____ State _____ Zip Code _____

Parent/ Guardian Name _____

Phone # _____

Emergency Contact (other than Parent/Guardian) _____

Relationship to Child _____

Emergency Contact Phone # _____

Health Information (if registering multiple children, please specify)

Allergies: _____

Other Medical Concerns: _____

I agree to the best of my knowledge, the information given is accurate and complete. By signing, I give my permission for my child to participate in the VBS program from 6:00-8:00pm at Hastings Baptist Church, 309 E. Woodlawn Ave, Hastings, MI 49058. I understand that my child will be participating in crafts and be part of a Bible lesson. I give my permission for the volunteers and church staff to take my child for emergency care in the event of an accident that cannot be reached at that time. I do hereby waive, release, absolve, indemnify and agree to hold harmless Hastings Baptist Church and its officers, directors, employees, agents, representatives, volunteers, and members from and against all claims, damages, losses, and expenses, including reasonable attorneys' fees, that may be asserted against or incurred by Hastings Baptist Church or any of its officers, directors, employees, agents, representatives, volunteers, or members in connection with or arising out of the child's participation in the VBS program. I also hereby give permission to use photos, video or any other media record of my child's participation for any lawful purposes.

Parent/Guardian Signature _____