



# Philadelphia UMC Vacation Bible School Registration

July 18-22

Ages: 3 years ( by 12/31/ 2009 - rising 6<sup>th</sup> grade)

Parents' Full Name(s) \_\_\_\_\_  
Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Email address \_\_\_\_\_

Are you members of Philadelphia UMC? Y N Are you a guest? Y N

Name of at least one child you would like to be in a group

with: \_\_\_\_\_

*We will do our best to honor Group requests*

## Emergency Release Form

The child(ren) registered on this form may be released to the following other individuals(s) with appropriate identification:

Emergency contact Information:

Name \_\_\_\_\_

Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_

Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Name of

Physician \_\_\_\_\_ Phone \_\_\_\_\_

I will not hold the church responsible for any accident, but should the unforeseen occur and my child needs emergency medical care, the church has my permission to have my child treated by a competent physician if I cannot be reached.

Parent/ Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Media Consent Information:

I hereby give permission for my child to be photographed or video recorded and for these images to be published in order to celebrate this VBS experience.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Philadelphia UMC: VBS Registration Continued  
Registrant #1

Child's Full Name \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Gender \_\_\_\_\_  
Grade completed 09-10 School Year (circle) PK3 PK4 K 1<sup>st</sup> 2<sup>nd</sup> 3<sup>rd</sup> 4<sup>th</sup> 5<sup>th</sup>  
Allergies? \_\_\_Yes \_\_\_No Special Need? \_\_\_Yes \_\_\_No  
If yes, please explain \_\_\_\_\_

Registrant #2

Child's Full Name \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Gender \_\_\_\_\_  
Grade completed 09-10 School Year (circle) PK3 PK4 K 1<sup>st</sup> 2<sup>nd</sup> 3<sup>rd</sup> 4<sup>th</sup> 5<sup>th</sup>  
Allergies? \_\_\_Yes \_\_\_No Special Need? \_\_\_Yes \_\_\_No  
If yes, please explain \_\_\_\_\_

Registrant #3

Child's Full Name \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Gender \_\_\_\_\_  
Grade completed 09-10 School Year (circle) PK3 PK4 K 1<sup>st</sup> 2<sup>nd</sup> 3<sup>rd</sup> 4<sup>th</sup> 5<sup>th</sup>  
Allergies? \_\_\_Yes \_\_\_No Special Need? \_\_\_Yes \_\_\_No  
If yes, please explain \_\_\_\_\_

**Dinner Registration: (5:40-5:45)**

Monday, July 19 (ckn nuggets) \_\_\_\_\_ #children \_\_\_\_\_ # adults  
Tuesday, July 20 (pizza) \_\_\_\_\_ # children \_\_\_\_\_ # adults  
Wednesday, July 21 (pancakes) \_\_\_\_\_ # children \_\_\_\_\_ # adults  
Thursday, July 22 (hot dogs) \_\_\_\_\_ # children \_\_\_\_\_ # adults

Vacation Bible School is a ministry which we, as a community of faith, provide for our children. We encourage each parent to volunteer in some way so that we may all be a part of this fun, family experience. Please indicate below where you are willing to serve:

Preschool                      Elementary      Crafts                      Decorations  
Set Up/Take Down                      Recreation      Drama      Storytelling      Anywhere!

If you are not available during VBS hours, there are still many opportunities to help. Please note your availability and areas of interest here: \_\_\_\_\_.