

**Vacation Bible School
Registration Form**

Santa Clara KUMC'S 2017 VBS

June 14-16, 5:30 PM-8:30 PM

June 17, 10:00 AM – 2:00 PM



PARENT/GUARDIAN NAME(S):		
ADDRESS	CITY:	ZIP:
EMAIL:	CELLPHONE NUMBER:	
DO YOU HAVE A HOME CHURCH: YES / NO	CHURCH NAME:	

NAME OF CHILD 1:		GRADE IN MAY 2017: Preschool / Pre-K / K / 1 / 2 / 3 / 4 / 5
BIRTHDAY:		T-SHIR SIZE: X-SMALL(2-4) / SMALL(6-8) / MEDIUM(10-12) / LARGE(14-16)
GENDER: BOY / GIRL	AGE:	LANGUAGE: ENGLISH / KOREAN / BOTH / OTHER ()
ALLERGIES/MEDICINES/SPECIAL NEEDS:		

NAME OF CHILD 2:		GRADE IN MAY 2017: Preschool / Pre-K / K / 1 / 2 / 3 / 4 / 5
BIRTHDAY:		T-SHIR SIZE: X-SMALL(2-4) / SMALL(6-8) / MEDIUM(10-12) / LARGE(14-16)
GENDER: BOY / GIRL	AGE:	LANGUAGE: ENGLISH / KOREAN / BOTH / OTHER ()
ALLERGIES/MEDICINES/SPECIAL NEEDS:		

NAME OF CHILD 3:		GRADE IN MAY 2017: Preschool / Pre-K / K / 1 / 2 / 3 / 4 / 5
BIRTHDAY:		T-SHIR SIZE: X-SMALL(2-4) / SMALL(6-8) / MEDIUM(10-12) / LARGE(14-16)
GENDER: BOY / GIRL	AGE:	LANGUAGE: ENGLISH / KOREAN / BOTH / OTHER ()
ALLERGIES/MEDICINES/SPECIAL NEEDS:		

EMERGENCY CONTACT PERSON: _____ PHONE: _____

In registering my child for Santa Clara KUMC VBS 2017, I understand and assume all incidental risks involved in group activities. In case of injury to my child, I do hereby release, indemnify, hold harmless and waive all claims against the church, staff, teachers, volunteers, church officers, and its employees. I also acknowledge that I have obligation to pay the appropriate fees, and will do so as promptly as possible. I certify that I have read, understood the foregoing message, and give consent voluntarily.

I hereby grant to Santa Clara KUMC the right to photograph, film or videotape my child and use the photograph and or other digital reproduction of him/her or other reproduction of his/her physical likeness for publication processes, whether electronic, print, digital or electronic publishing via the Internet. I waive the right to inspect or approve the finished version(s) of such images including written copy that may be created in connection therewith.

Parent/Guardian Name (please print): _____

Signature of Parent/Guardian: _____ Date: _____

FOR CHURCH USE ONLY

Registration	Early-bird Fee (before 5/12)	\$ 20 X _____ (# of children) = \$ _____
	Regular Fee (after 5/12)	\$ 30 X _____ (# of children) = \$ _____
Amount Due: \$ _____ Paid on: _____ <input type="checkbox"/> Cash <input type="checkbox"/> Check # _____ Received by: _____		