

Shipwrecked VBS On-line Registration Form

(One Child per Form) Please Print (except Signature)



Name _____ Age _____ Birthdate _____

Address _____ Parents Names _____

Contact Phone(s) _____ Name _____

Add'l phone _____ Name _____ Grade just completed ____

Allergies or other medical conditions _____

Parent signature _____

I *Give / Do Not Give* my permission for Jamestown United Methodist Church to use pictures of my child on their website for informational purposes.

Emergency Contact:

Name: _____ Phone: _____

Relationship: _____

Shipwrecked VBS On-line Registration Form

(One Child per Form) Please Print (except Signature)



Name _____ Age _____ Birthdate _____

Address _____ Parents Name _____

Contact Phone(s) _____ who _____

Add'l phone _____ Name _____ Grade just completed ____

Allergies or other medical conditions _____

Parent signature _____

I *Give / Do Not Give* my permission for Jamestown United Methodist Church to use pictures of my child on their website for informational purposes.

Emergency Contact:

Name: _____ Phone: _____

Relationship: _____



Contact Release Form

To help us insure the safety and well-being of your child, print this page and print the name(s) (other than your own or Emergency Contact person) that have permission to pick your child up after VBS has ended. For the safety of your child, you will be given a red card with the name of each person you give permission to pick up your child. To pick up your child, you and anyone on your contact list, must have the red card and if necessary, a photo ID (e.g. driver's license) with them so that we may check to be sure your child is going home with a safe person. If the person is not on your list, they will not be allowed to pick up your child.

Thank you so much for your assistance in helping us protect your children.

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____