



Sweethaven Baptist Church VBS Registration Form

August 8-12, 2022

Child's Name: _____

Parent/Guardian Name: _____

Home Address: _____

Home Phone: _____ Cell Phone: _____

*Email Address: _____

Child's Age:* _____ (child must be potty-trained.) Last grade completed: _____

Emergency Contact Name: _____

Relationship to child: _____

Phone Number: _____

* Person who will pick up child at the end of VBS each day:

Name/Relationship: _____

Phone Number: _____

Please list any allergies (include **ALL FOOD** allergies) VBS staff should be aware of:

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Other medical or behavioral issues the VBS staff should be aware of:

Waiver form – 2022 VBS

I, _____ (printed) the legal guardian of _____ (child's name printed) have been informed of the activities sponsored at Sweethaven Baptist Church Vacation Bible School and hereby give my consent for my minor child to participate in this Vacation Bible School. I understand that all reasonable safety precautions will be taken by the leaders of Vacation Bible School and that the possibility of injury, illness or hazard does exist. I further agree not to hold Sweethaven Baptist Church, its leaders, employees, and volunteer staff liable for damages, losses, diseases, or injuries incurred by the minor listed on this form. I also authorize Sweethaven Baptist Church, its employees or agents to render or obtain such emergency medical care or treatment as may be necessary should any injury, harm, or accident occur while participating in Vacation Bible School.

Parent/Guardian Signature

Date

In case of emergency, please contact:

Name: _____ Phone: _____

Alternate: _____ Phone: _____

Photo Consent Form VBS 2022

I, _____, hereby grant permission to Sweethaven Baptist Church to use my and my child(s) photograph(s), on the church website, on the church Facebook page, or in other official church publications without further consideration. I further acknowledge the right of Sweethaven Baptist Church to edit, crop, or treat the photograph(s) at its discretion. I understand that should Sweethaven Baptist Church choose not to use my photograph at this time, that it is not waiving its right to use my photograph(s) at some time in the future.

YES, I give my consent for my child(ren) and my photograph to be used.

NO, I would not like my child(ren) and my photograph to be used.

Parent/Guardian Signature

Date