



## VBS CAMPER REGISTRATION FORM - JUNE 24 – June 28, 2019

**Registration Deadline: June 1<sup>st</sup>**

Forms received after June 1<sup>st</sup> may be placed on a waiting list and **may not** receive a T-shirt.

**The Pre-K program is ONLY for children of volunteers.**

Please contact Michelle Unger at 503-364-7202 ext 209 or michelle@qpsalem.org with questions.

### VBS REGISTRATION FOR CHILDREN ENTERING KINDERGARTEN - GRADE 5

Child's First Name & Last Name	Birth Date & Year of Birth	Male Or Female	Grade entering in Sept. '19	Special learning or physical needs Food or Medicine Allergies Medication presently taking

Due to the nature of the mixed-age, family-like crews, campers will experience friendships with new people.

Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Email: \_\_\_\_\_ Church Affiliation \_\_\_\_\_

Mother's Name \_\_\_\_\_ Preferred Phone \_\_\_\_\_

Father's Name \_\_\_\_\_ Preferred Phone \_\_\_\_\_

Who will pick up your child each day? \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone Number: \_\_\_\_\_

If the above cannot be located, contact: \_\_\_\_\_ Phone Number: \_\_\_\_\_

I give permission for my child to participate in this Vacation Bible School. I do hereby release, hold harmless and covenant not to sue the Archdiocese of Portland in Oregon, Queen of Peace Catholic Parish, Calvary Baptist Church, and all employees and leaders involved in this event. Nor shall said persons be held financially responsible for any injury, illness, or death incurred as a direct result of this activity. I recognize the risks involved, understand all terms, and consent to these conditions. I remain fully liable for any legal responsibilities that may result from actions taken by my child. In the event of an emergency, and I cannot be contacted, I hereby authorize emergency treatment to be administered.

**Signature of parent/guardian** \_\_\_\_\_ **Date** \_\_\_\_\_

**Photo/Video Permission:** I hereby give Queen of Peace Parish/School and Calvary Baptist Church permission to use photographs/videos of myself, and any family members present at VBS, on its website, in parish/school publications, and/or their *Facebook* page. I understand that there will be no identifying information (e.g., name, age, etc.) included. This permission will be in effect from June 20, 2019 until June 25, 2020. All requests to have pictures/videos removed will be honored.

\_\_\_\_\_  
Signature (Adult/Parent/Guardian)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name (Adult/Parent/Guardian)

**PLEASE COMPLETE THIS VBS FEE & ORDER SECTION:**

**TOTAL**

**Registration Fees:** (\$20/child or \$45/family max.): \_\_\_\_\_

**Music:** \_\_\_\_\_ \$8 for CD: \_\_\_\_\_

\_\_\_\_\_ \$16 for DVD: \_\_\_\_\_

**T-Shirt:** \$10 per T-shirt **MUST BE ORDERED BY JUNE 1<sup>st</sup>!**

**Child Sizes:** \_\_\_S \_\_\_M \_\_\_L \_\_\_XL

**Adult Sizes:** \_\_\_S \_\_\_M \_\_\_L \_\_\_XL

TOTAL Shirts \_\_\_\_\_ x \$10 each: \_\_\_\_\_

**Offer a Scholarship Gift** (To sponsor a child at VBS): \_\_\_\_\_

**Offer Donation to Support our Volunteers** (T-shirts, pizza) \_\_\_\_\_

**Subtotal of Registration, music, T-shirt and donations:** \_\_\_\_\_

*Subtract the amount of financial assistant needed:* -- \_\_\_\_\_

**TOTAL AMOUNT ENCLOSED:** \_\_\_\_\_

**FOR OFFICE USE:**

**Check #:** \_\_\_\_\_ **Check amount:** \_\_\_\_\_

**Cash amount:** \_\_\_\_\_

**Other payment:** \_\_\_\_\_

**Food Allergy Confirmed:** \_\_\_\_\_

**Special Needs Confirmed:** \_\_\_\_\_

**Payable to:**

**Queen of Peace Catholic Church**

4227 Lone Oak Rd SE

Salem, OR 97302.