

Tuesday Nights at Hero Headquarters

Registration for West Side Baptist Church's VBS 2017

* Required

1. **Email address ***

2. **Child's First Name ***

3. **Child's Last Name ***

4. **Child's date of birth ***

Example: December 15, 2012

5. **What grade will your child be in this fall? ***

6. **Child's shirt size ***

Mark only one oval.

- Youth- small
- Youth- medium
- Youth- large
- Youth- x-large
- Adult- small
- Adult- medium
- Adult- large
- Adult- x-large
- Adult- 2XL
- Adult- 3XL

7. **Child's home address ***

8. **Parents' names ***

9. Number to reach parent during VBS *

10. Allergies/ Medical Information/ other *

11. Emergency contact (name and number) *

12. Dismissal Information (Names of persons who may pick your child up from VBS) *

13. Medical release: I, the undersigned parent/ guardian, do hereby grant permission for my child to attend West Side Baptist's VBS. I hereby authorize West Side Baptist Church and its representatives to obtain or provide medical treatment, if deemed necessary, for my child in the event of an unforeseen injury or illness during VBS and do hereby hold West Side Baptist Church, as well as its representatives, harmless in the exercise of this authority. I acknowledge and understand that, should such an emergency arise, I will be responsible for any medical bills that may be incurred on behalf of my child for said injury or illness. *

Check all that apply.

I agree

14. Photo Release: I, the undersigned parent/ guardian, hereby acknowledge that West Side Baptist Church has my permission to publish photos of my child during their services, on their website, or in any other publications they provide for the purpose of promoting local events. *

Mark only one oval.

Yes, I give permission.
 No, I do not give permission.

15. By signing your name below, you are electronically signing this form and agree that all information is accurate and whole, to the best of your ability. *
