

2019 VBS at FLC



- WHEN:** July 15-19, 2019, 9am-12pm
- WHERE:** First Lutheran Church, ELCA 2146 Wright St. Blair
- WHO:** All 3 year olds—5th graders
- COST:** \$10/child or \$30/family—suggested donation
 Donation not required for participation—no child will be turned away.
 Please contact Erika Cada if you have questions.
- DEADLINE:** June 28 (for planning)
 Registrations will still be accepted after this date. Final deadline: July 8th

Child's Name	Birthday	Grade Finished 5/19

Parent(s) Name(s): _____

Address: _____

Daytime Phone: _____ Email: _____

Church Affiliation: _____

Emergency Contact Name/Phone: _____

*****Form Continued on Back*****

Participation and Medical Release Form

I certify that I am a parent or legal guardian of _____
I acknowledge that participation in VBS at First Lutheran Church, ELCA is voluntary and that my child's participation in activities involves some risk of physical injury or illness. I agree to accept and assume any and all risks of injury or illness arising from my child's participation and hereby waive, release, and discharge First Lutheran Church, ELCA, its directors, employees, volunteers and leaders from any and all liabilities associated with such participation. I grant my authorization and consent for all staff and volunteers at First Lutheran Church, ELCA to administer general first aid treatment for minor injuries or illnesses experienced by my child. If the injury or illness is life threatening or requires emergency treatment, I grant my authorization and consent for staff to summon professional emergency personnel to attend, transport and treat my child and to issue consent for any medical care deemed advisable by and performed under supervision of a licensed medical professional. I agree to assume financial responsibility for all expenses of such care. By signing below, I acknowledge and accept the terms associated with this Participation and Medical Release Form.

Signature of Parent/Guardian

Photography Consent Form

By virtue of my child's participation in activities at First Lutheran Church, ELCA, I understand and give permission that still or moving images may be taken of my child by staff and volunteers of First Lutheran Church, ELCA for various publications, website usage and audio/video recording, including live streaming. I understand that these images have a wide audience and my child's image will be available to the general public. It is further understood that First Lutheran Church, ELCA assumes no liability or responsibility whatsoever concerning any consequences of such use. If you do not wish for your child's images to be used, you must send an email request to Erika Cada, First Lutheran Church Director of Children's and Youth Ministries at ecada@firstlutheranblair.org.
By signing below, I acknowledge and accept the terms associated with this Photography Consent Form.

Signature of Parent/Guardian

Questions? Please contact Erika Cada, Director of Children's & Youth Ministries
ecada@firstlutheranblair.org OR 402-533-0918

For Office Use Only

Paid: Yes / No

Amount: _____