

2018 FLC VBS REGISTRATION JUNE 18-22

PART I: PARTICIPATION & FEES

Child's Name: _____

Age during camp: _____ Grade in school fall 2018 _____

T-shirt (youth) size S M L XL Will ride bus to camp (circle one): yes no

Child's Name: _____

Age during camp: _____ Grade in school fall 2018 _____

T-shirt (youth) size S M L XL Will ride bus to camp (circle one): yes no

Child's Name: _____

Age during camp: _____ Grade in school fall 2018 _____

T-shirt (youth) size S M L XL Will ride bus to camp (circle one): yes no

Child's Name: _____

Age during camp: _____ Grade in school fall 2018 _____

T-shirt (youth) size S M L XL Will ride bus to camp (circle one): yes no

YOUTH VOLUNTEER (Junior House Leader – 6th grade+)

Name: _____ Age _____ Grade _____ E-mail _____

Contact: (if avail.) Phone _____ I plan to attend the retreat (circle one) YES NO

Registration fees are waived for junior leaders

ADULT (AGES 18+) VOLUNTEERS

There are a wide variety of ways to share in the camp experience with your children by volunteering! If you are interested in participating in VBS as a volunteer, please complete the following information, and the camp director will contact you! (You will be required to complete a volunteer form and authorize a background check.)

Name _____ Phone _____ E-mail _____

Registration fees are waived for children of a full-time parent or grandparent volunteer.

Camp fee is \$30 per child if before Easter (April 1), or \$35 per child after April 1

Non-refundable camp fee includes one music cd per family, camp t-shirt, bus transportation to Walcamp, snacks, crafts, swimming, canoeing, fishing.

_____ children attending @\$30 (before April 1) or \$35 per child = _____

_____ children needing financial assistance @\$10 per child = _____

(Call Camp Director Deb Farnsworth @ 815-758-0643 for more information)

Checks should be made to First Lutheran Church (VBS in memo line) Total _____

Please indicate your plans to attend the hot dog potluck / camp song celebration at Walcamp at noon on Friday, June 22. Total number of family / friends attending = _____

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PART II - HEALTH & RELEASE

PARTICIPATING CHILDREN: _____

I, (SIGNATURE) _____ parent / legal guardian of the participating children and junior leaders listed above, release and discharge all First Lutheran Church staff and VBS volunteers of any claims, demands, actions, or cause of action past, present, or future arising from any damage or injury while participating in any VBS 2018 activities on First Lutheran Church property, while traveling with First Student busses, or while at Walcamp.

I give staff and VBS volunteers of First Lutheran Church permission to seek first aid or other emergency medical treatment for my children listed above during their participation in VBS. (initial) _____ date _____

I give permission for the children listed above to be photographed during VBS activities and for these photos / videos to be used in social media by First Lutheran Church. (initial) _____ date _____

I understand that First Lutheran staff and VBS volunteers reserve the right to withdraw from activities any VBS participant who endangers the safety of volunteers or other children in aggressive or negative behaviors. Steps to de-escalate the situation prior to withdrawal from camp will include a "time-out" or withdrawal from a specific activity to allow the child to regain control of their actions and make a choice to participate appropriately. (initial) _____ date _____

Parents / Guardian:

NAME: _____ cell: _____ Pick-up Y/N

_____ cell: _____ Pick-up Y/N

Address:(street) _____ (city) _____ (zip code) _____

Email: _____

Alternative Emergency Contact (if the above person cannot be reached)

NAME: _____ cell: _____ Pick-up Y/N

_____ cell: _____ Pick-up Y/N

Are there any allergies or health concerns for any participants listed above?

Name _____ allergies? Y/N _____

Other health concerns _____

Name _____ allergies? Y/N _____

Other health concerns _____

Name _____ allergies? Y/N _____

Other health concerns _____