



VBS July 9-13, 2018

St. Mary of the Visitation Parish

Registration Form

Please return completed form and registration fee **by June 15, 2018** to:

St. Mary of the Visitation Parish 16 Cooper St. Cambridge (H), ON N3C 2N2
or personally at Mass.



- Register my child for Mon-Fri VBS \$50 (T Shirt included)
- Yes, I would like a VBS backpack with attached cape \$10 (optional)

TOTAL COST: _____

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Child's Information:

Name: _____

Sex: (circle one) M F Age: _____ Grade : _____ (as of June 2018)

T-shirt size: (circle one) child sizes : XS S M L / adult sizes: S M L XL

Allergies or medical conditions: _____

Health Card Number: _____

Family Information:

Parents/Guardians' Name(s): _____

Address: _____

Phone: *Hm:* _____ *Wk:* _____ *Cell:* _____

Email: _____

Persons authorized to pick up my child: _____

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Additional Emergency Contact:

Name: _____

Phone: _____ Email: _____

I understand that reasonable precautions will be taken to safeguard the health and well being of the participants in this VBS and that I will be notified as soon as possible in the event of an emergency. In the case of sickness or an accident, I authorize and consent the VBS Team, or other associated volunteers of the VBS program to obtain medical care from a licensed physician, hospital, or medical clinic for my son/daughter in the event that myself or other legal guardian(s) cannot be reached. I hereby do release and forever discharge this Diocese, and Parish from all manners of actions, claims which I or the child named above shall or may have for any reason, arising during my child's attendance of the VBS.

Unless other written instruction is submitted, I also consent to allowing my child's image to be recorded, either by photograph or video, and used during the VBS week or for future advertisement of Parish VBS programs. Any other use will require your further consent.

Parent / Guardian Signature

Date