

"Who is my Neighbor?" VBS

Mt. Olive Lutheran and Northminster Presbyterian are excited to have you join us for Vacation Bible School at Mt. Olive! The dates are July 15-19th, 9am-12pm, where children will be doing crafts, singing, games, bible stories, and enjoy a snack.

Please make sure your child comes with hats, sunscreen, and closed toed shoes. The last day (Friday) please make sure your child brings bathing suit, towel, shoes they can get wet and sunscreen.

We will let out at 12:00pm every day. Please be here promptly, any time past 12:15 will be followed by removal from VBS program:

Registration forms are due July 15th, 2019

(Please return to Mt. Olive Lutheran's or Northminster's church office, or email: lizzie.b.fox@gmail.com or mail to Mt. Olive at 2780 North Center Street Hickory 28601)

Name: _____ Grade last completed: _____
Address: _____ City: _____ State: _____

Parent/Guardian's Name:

Phone Number: _____

Parent's email: _____

Authorized Pick- up:

Name: _____ Relation: _____ Number: _____

Name: _____ Relation: _____ Number: _____

Emergency Contact:

Doctor: _____

Phone: _____

Medication: _____

Does your child have any medications that he/she needs to take while in our care?

_____ EpiPen _____ Inhaler _____ Other (Please list below in the instructions)

Instructions: _____

Allergies/Health Conditions:

Are the program leaders allowed to give your child medication (as specified above):

_____ Yes _____ No

Are churches allowed to take and post pictures on website, bulletin boards, social media, or anything for the churches? _____ Yes _____ No

Liability Agreement:

As the parent or legal guardian of _____ (print name of child), I hereby give permission for my child to participate in the Mt. Olive Lutheran and Northminster Presbyterian VBS Program. I understand that Mt. Olive Lutheran and Northminster Presbyterian are nonprofit charitable institutions, which are voluntarily presenting this program for my child, other participants, and the community. I also understand that the program has activities that can involve physical contact with other participants, the ground or equipment, and that there is a resulting risk of physical injury to my child.

I have explained these risks and benefits of participating in this program to my child and my child is in proper physical condition and has no existing injuries or conditions that could jeopardize his/her safety or health, or the safety or health of the other participants.

I therefore release and discharge all liability for any harm or injury suffered directly or indirectly as a result of my child's participation in the VBS Program and I agree not to sue Mt. Olive Lutheran Church and Northminster Presbyterian, its representatives, staff, or volunteers on any such claim. I also give permission for the staff, representative, or volunteers of the VBS Program to administer first aid or to seek medical care for my child during my child's participation in the program, including transportation of my child to a medical facility for additional treatment that appears necessary.

Print name of Parent/Guardian: _____

Signature of Parent/Guardian: _____

Date: _____