

# Vacation Bible School Registration

Hosted by Belmont United Methodist Church

2701 S. Smithville Rd. Dayton (937) 254-1788

July 23th through June 27th, 6:00 to 8:00 PM

Children ages 4 through 6th grade

*Child #1*

Name \_\_\_\_\_

Age \_\_\_\_\_

Last Grade Completed \_\_\_\_\_

Allergies/Other Needs \_\_\_\_\_

\_\_\_\_\_

*Child #2*

Name \_\_\_\_\_

Age \_\_\_\_\_

Last Grade Completed \_\_\_\_\_

Allergies/Other Needs \_\_\_\_\_

\_\_\_\_\_

*Child #3*

Name \_\_\_\_\_

Age \_\_\_\_\_

Last Grade Completed \_\_\_\_\_

Allergies/Other Needs \_\_\_\_\_

*Child #4*

Name

\_\_\_\_\_

Age

\_\_\_\_\_

Last

Grade

Completed

\_\_\_\_\_

Allergies/Other

Needs

\_\_\_\_\_

\_\_\_\_\_

Parent/Guardian \_\_\_\_\_

Address \_\_\_\_\_

Phone

Number

\_\_\_\_\_

Email

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Emergency

contact

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Phone

Number

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Relationship

to

Children:

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## 2018 VBS SAFE SANCTUARY POLICIES

The following rules are intended to ensure the safety of all children who attend VBS.

Please list any other adults besides the parent/guardian who will be permitted to pick your child up each evening.

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I allow my child to be released into the custody of the adult(s) listed above.

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

To ensure that children are picked up by the appropriate parties, any adult picking up a child at the end of VBS each evening should be prepared to present a photo ID if requested. This will help avoid potential custodial issues and ensure the safety of each child. If an adult does not have a photo ID, Belmont UMC reserves the right to take the appropriate steps to confirm the identity and/or custodial rights of the adult.

I understand and agree to this.

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

Adult relatives/friends will not be allowed to follow children around Vacation Bible School. Adults are free to come to the opening and closing in the sanctuary each evening, but will not be permitted to follow the children around during any other VBS activities.

I understand and agree to this.

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

I give my permission for Belmont UMC to use pictures of my children on our website or articles for promotional purposes.

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_