



Children's Registration

Westlake United Methodist Church
Vacation Bible School
June 12-16, 2017

Parent Name _____

Address _____ Zip _____

Primary Phone during VBS _____ Alternate phone _____

Email _____

Emergency Contact Information (other than person listed above)

Name _____ Phone _____ Relationship _____

Our Church Home is _____ I would like information about WUMC

PLEASE NOTE: Children must be **at least 4 years old** as of September 1, 2017 & no older than having just completed 4th grade to participate in VBS, 2017.

1st Child's Name _____ Birth Date _____ Sex M ___ / F ___

Grade Entering in Fall 2017 _____ T-shirt Size: YXS, YS, YM, YL, YXL

Allergies _____

2nd Child's Name _____ Birth Date _____ Sex M ___ / F ___

Grade Entering in Fall 2017 _____ T-shirt Size: YXS, YS, YM, YL, YXL

Allergies _____

3rd Child's Name _____ Birth Date _____ Sex M ___ / F ___

Grade Entering in Fall 2017 _____ T-shirt Size: YXS, YS, YM, YL, YXL

Allergies _____

Please notify us of **anything** we should consider when placing your child(ren) in a group (personality traits, energy levels, dietary restrictions, medical devices, special needs etc.)

If possible, (*NO guarantees) please place my child with _____

PLEASE COMPLETE next page

MEDICAL RELEASE/MEDIA PERMISSION

1st Child's Name _____

2nd Child's Name _____

3rd Child's Name _____

Medical Release: I give church staff and volunteers permission to obtain medical attention for my child(ren). I understand that I am financially responsible for all medical expenses that occur and that staff and volunteers will take my child(ren) to the closest emergency medical clinic or hospital, or call EMS if necessary.

Signature of Parent/Guardian _____

Permission for Photos: We may be photographing the children during VBS for use in church publications, such as the church website, social media, newsletter, and/or in a slide show during Sunday services. Names will not be used in any photos.

Please check one: _____ I GIVE PERMISSION _____ I DO NOT GIVE PERMISSION
to use my child(ren)'s photos in this way.

Signature of Parent/Guardian _____

As part of registration, I commit to help in the following ways:

_____ **I can help on-site during VBS week, 9-12:00 daily, June 12-16**

_____ **Call on me to help with administrative and preparation tasks before June 12**

_____ **I will provide craft supplies or snacks (needed items will be identified in a *SignUp* email)**

Fees:

\$40 for first child enrolled @ \$40 _____

\$20 for each additional child enrolled @ \$20 _____

Donation to help support VBS _____

Total Amount Paid _____

Check Payment Type:

Cash _____

Check _____

Credit Card _____

Paid Online _____

If paying by check, make check payable to WUMC with "VBS" in the memo line. Fees can also be paid online via credit card at www.westlake-umc.org. Registration is not complete until all fees are paid. Return form and payment to church office or WUMP office. Scholarships are available, please contact Megan Getman, Children's Ministries Director, at 327-1335 x124 email: mgetman@westlake-umc.org.