



**Growing with God**  
John 15:5

## Family Registration Form

June 7th, 14th, 21st, & 28th  
9:00 am - 12:30 pm

For kids who have completed Kindergarten - 5th grade

### Child Information:

Child Name	Birthdate	Grade completed	Allergies

### Parent information:

Parent/Guardian name(s) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_ Zipcode \_\_\_\_\_

Home phone number \_\_\_\_\_ Cell phone number \_\_\_\_\_

### Emergency Information:

Emergency Contact #1 \_\_\_\_\_ Phone number \_\_\_\_\_

Emergency Contact #2 \_\_\_\_\_ Phone number \_\_\_\_\_

### Dismissal Information: Who may pick up your child at the end of each VBS day?

Name \_\_\_\_\_ Relationship to child \_\_\_\_\_

Name \_\_\_\_\_ Relationship to child \_\_\_\_\_

Please return registration form by email to: [shr929@gmail.com](mailto:shr929@gmail.com)

By mail to: Union Grove Baptist Church 15301 FM 362 Navasota, TX 77868

*Consent for Participation, Medical Treatment, and Photo/Video Release:*

I am the parent or legal guardian of the above named child(ren). I give permission for my child to attend Vacation Bible School at Union Grove Baptist Church and participate in all VBS activities.

I give my permission for the VBS staff to administer basic first aid to my child(ren) (named above) in the event of an injury. I understand that the VBS staff will contact emergency services in the event of a significant injury and all expenses for such emergency services will be paid by me.

I acknowledge that Union Grove Baptist Church will not be responsible for medical expenses incurred.

I give permission for the above named child(ren) to be photographed during VBS, and for the images to be published, reproduced or distributed by Union Grove Baptist Church in all outlets, including, but not limited to, internet and church publications, without liability or limitation on my or my minor's part. My child's name will NOT be published in conjunction with their photograph.

Signature of parent/guardian \_\_\_\_\_ Date \_\_\_\_\_