

**REGISTRATION FORM (one form per child)
(PLEASE PRINT)**

Child's Name _____
Birth Date _____ Preschool year/ Grade Completed _____
Address _____
City _____
Home Phone(____) _____
Cell Phone (____) _____ Church Home _____
Parents' Names _____ Parent email _____

**For security reasons
please attach your
child's photo.**



(Used only to keep you updated on VBS information!)

Please circle child's T-shirt size: Youth --- S(6-8) M(10-12) L(14-16) Adult--- S M L

While we cannot guarantee that special class placement will be honored, we will make every effort to accommodate requests noted below. NO class changes will be made after June 8, 2015. Note any special requests here:

HEALTH RELEASE (required)

In case of emergency, notify: Parent / Guardian (circle one)

Name _____ Phone _____

Name _____ Phone _____

If parent cannot be reached, notify:

Name _____ Phone _____

Please identify any specific health problems or facts concerning the child's medical history about which we or a treating physician should be aware, such as allergies, allergies to medication such as penicillin, unusual reactions to insect bites, medications being taken, physical impairments, etc.
PLEASE PRINT.

PARENT'S AUTHORIZATION

If reasonable attempts to contact me have been unsuccessful in an emergency, I hereby give permission to The Rocky River Presbyterian Church and Vacation Bible School to secure necessary emergency treatment including transport to a local hospital, and for any licensed physician or dentist to administer any treatment considered necessary. This authorization does not cover major surgery unless the medical opinions of two licensed physicians or dentists, concurring in the necessity for such surgery, are obtained prior to the performance of such surgery.

Date _____ Signature _____
Parent / Guardian (circle one)

PARTICIPANT WAIVER OF LIABILITY (required)

For and in consideration of permitting the person indicated above to enroll in and participate in Vacation Bible School at The Rocky River Presbyterian Church, I hereby voluntarily release, discharge, and relinquish any and all actions, causes of action, and claims for personal injury or property damage of or to the participant arising out of, or in any way related to, their participation in such program. I represent that I understand that this release is intended to, and does discharge in advance The Rocky River Presbyterian Church, Vacation Bible School, any and all of its officers, agents, volunteers, servants, and employees from any and all liability, actions and causes of action, even though that liability may arise out of the negligence or carelessness of the Church or its officers, agents, volunteers, servants, and employees. *I also give permission for my child to be photographed and understand that any photos may be displayed only on the church premises or published in church literature.* Only the person(s) listed below may pick up my child.

Date _____ Signature _____
Parent / Guardian (circle one)

THE FOLLOWING PERSON(S) ARE AUTHORIZED TO PICK MY CHILD UP:

1. NAME: _____

PHONE: _____

2. NAME: _____

PHONE: _____

PLEASE MAIL COMPLETED
REGISTRATION FORM WITH CASH OR
CHECK PAYABLE TO "RRPC" TO LISA
WATTS AT THE ROCKY RIVER
PRESBYTERIAN CHURCH.

_____ amount paid
_____ For RRPC use only
check no. _____ date

VOLUNTEERING OPPORTUNITIES - You are the key to our VBS success!

PLEASE NOTE: Although we do not register children until they are 4, we do have a special class available for 3 year olds-open only to children of folks who volunteer at least 3 days of the week- free of charge and your 3 year-old can attend all 5 days. We also have daily nursery care available free of charge.

I could help during VBS

___ All week ___ Part week (circle days available) M T W Th F

Volunteer preferences:

___ Crafts ___ Snacks ___ Class Shepherd (all week) ___ Music ___ Nursery
___ Decorations (before VBS) ___ wherever I am most needed

___ I am willing to make a donation for snacks (you will be contacted with specific items needed)

ROCKY RIVER PRESBYTERIAN CHURCH & ST. CHRISTOPHER CATHOLIC CHURCH

present

VACATION BIBLE SCHOOL

at

Rocky River Presbyterian Church, 21750 Detroit Road

Rocky River, Ohio 44116 (440) 333-4888

Message Received

Hearing God's Call



Monday, June 22 – Friday, June 26, 2015

9:00 – 11:30 am

Ages 4 through Grade 5

Community Worship Service and Picnic

Sunday, June 28

10:30 am

at Rocky River Presbyterian Church

A donation of \$35.00 for the first child and \$25.00 for each additional child is suggested. The donation includes a T-shirt, which each child receives at the end of the week. Please make checks payable to Rocky River Presbyterian Church. The maximum per family is \$75.00. Scholarships are available by calling Lisa Watts at Rocky River Presbyterian Church at (440) 333-4888.

***Don't let the kids have all the fun! See other side for opportunities to be involved!
Registration and class size are limited, so early registration is encouraged.***

Registration closes Tuesday, May 26 at 3 pm.

***IF SPACE IS STILL AVAILABLE AFTER MAY 26, ADDITIONAL REGISTRATIONS
WILL BE ACCEPTED WITH A LATE FEE OF \$10 PER CHILD.***

Please see other side for registration form.

***There will be NO PARENT MEETING this year. If you are a volunteer, you may pick up
your child's information at the volunteer meeting on Sunday, June 14 at 7:00 pm.
Otherwise, you must pick up information the week before VBS (June 15-19) during regular
church office hours: 8:30 am-3:30 pm. Please call Lisa Watts at 440-333-4888 for more
information.***