

REGISTRATION FORM

Please make checks payable to First Pres. Caldwell with "VBS" in the memo and send it, along with this registration form, into the church – ATTN: Jaime Staehle.

Parent Names _____

Parent Email _____

Address _____ Phone _____

Child Name _____ Grade Entering _____ Sport Choices (1&2) _____

Child Name _____ Grade Entering _____ Sport Choices (1&2) _____

Child Name _____ Grade Entering _____ Sport Choices (1&2) _____

Child Name _____ Grade Entering _____ Sport Choices (1&2) _____

Emergency Info

Parent Cell Phone _____

Emergency Contact (besides parents) _____ Phone _____

Doctor _____ Phone _____

Medical and Liability Release

Every activity sponsored by The First Presbyterian Church at Caldwell is carefully planned and adequately supervised by mature adults. However, even with the best of planning and precaution, unforeseen events can occur. By signing this form, the parent/guardian agrees to assume and accept all risks and hazards inherent in church-related social activities. They also agree not to hold this church, its employees, its volunteer assistants, or church members' private facilities, liable for damages, losses, or injuries to the person or property undersigned. The parents/guardians understand that they are signing for the minor listed on this form and the signature is for both medical and liability release.

In the event that I cannot be reached in an emergency during the dates specified on this form, June 23-17, 2014, I hereby give my permission to the physician or dentist selected by the church leadership to hospitalize, to secure proper treatment, and/or order an injection, anesthesia, or surgery for my son or daughter as deemed necessary.

Signature of parent or guardian: _____ Date _____