



A Walk with The Good Shepherd Vacation Bible School 2023 Our Lady of the Rosary

Participant Registration Form

Dates: July 31 – August 3, **Times:** 9am to Noon

Location: **Our Lady of the Rosary**, 1500 East Wright Street - Office phone: 208-343-9041

Cost: by July 15: \$35 per child, \$85 family max, After July 15: \$40 per child, \$90 family max.

Family Information:

Parents/Guardians' Name(s): _____

Address: _____

E-mail address: _____

Phone Numbers:

Cell: _____ Home: _____ Work: _____

Emergency Contact:

Name: _____

Phone: _____ Relation: _____

Child's Information:

Name: _____

Sex: (circle one) M F Age: _____ Grade completed: _____

T-shirt size: (circle one) child sizes: S M L XL

Allergies or medical conditions:

Name: _____

Sex: (circle one) M F Age: _____ Grade completed: _____

T-shirt size: (circle one) child sizes: S M L XL

Allergies or medical conditions:

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Child's Information continued:

Name: _____

Sex: (circle one) M F Age: _____ Grade completed: _____

T-shirt size: (circle one) child sizes: S M L XL

Allergies or medical conditions:

Name: _____

Sex: (circle one) M F Age: _____ Grade completed: _____

T-shirt size: (circle one) child sizes: S M L XL

Allergies or medical conditions:

PLEASE SIGN AND DATE BELOW

LIABILITY RELEASE: I understand that reasonable precautions will be taken to safeguard the health and well-being of the participants in this VBS and that I will be notified as soon as possible in the event of an emergency. In the case of sickness or an accident, I authorize and consent the VBS Team, or other associated volunteers of the VBS program to obtain medical care from a licensed physician, hospital, or medical clinic for my son/daughter in the event that myself or other legal guardian(s) cannot be reached. I hereby do release and forever discharge this Diocese and Parish from all manners of actions, claims which I or the child named above shall or may have for any reason, arising during my child's attendance of the VBS.

Unless other written instruction is submitted, I also consent to allowing my child's image to be recorded, either by photograph or video, and used during the VBS week or for future advertisement of Parish VBS programs. Any other use will require your further consent.

Parent / Guardian Signature

Date

Be a Saint and Volunteer!

_____ Yes! I want to help kids learn more about Prayer and the Saints!

_____ Sorry, I am unable to volunteer at this time.

Please return completed form and fee for Early Registration by **Wednesday, July 15, 2023** to Tina Punnoose @ the OLR Church office.