



Christ the King Church  
 VACATION BIBLE SCHOOL 2022  
 June 20<sup>th</sup> - 24<sup>th</sup> 9am - 12noon

Registration Form for 4 year olds - 6<sup>th</sup> Grade

COST: \$15 per child with a cap of \$45 per family.

Make checks payable to: Christ the King Church

Registration Deadline: May 12, 2022. Registration will close at 180 children.

Late registration will result in no T-shirt for children.

LAST NAME: \_\_\_\_\_ EMAIL: \_\_\_\_\_

Child's Full Name	Grade Fall 2022	Gender M or F	Check here if this is a nursery-child. Include AGE!	T-Shirt Size YXS-YS-YM-YL-AS-AM-AL	Allergies, dietary restrictions &/or any other medical conditions

MOTHER'S NAME: \_\_\_\_\_ CELL: \_\_\_\_\_ WORK: \_\_\_\_\_

FATHER'S NAME: \_\_\_\_\_ CELL: \_\_\_\_\_ WORK: \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_ PHONE: \_\_\_\_\_

- ❖ All adult volunteers must be **child protection trained** and/or their renewals must be up-to-date. The deadline for all **NEW** volunteers is May 31<sup>st</sup>.
- ❖ Nursery will be available for volunteer's children under age 4. Please list children's names & ages on page one who need childcare!!!

**Please Check All that Apply:**

- Yes, I will be an adult volunteer for VBS the entire week, saving 100% on my registration fee. **Volunteer T-SHIRT SIZE:** \_\_\_\_\_
  - Yes, I have an older youth(s) (must be entering the 7<sup>th</sup> grade in the fall) who would like to volunteer for VBS.  
*Name(s) & T-shirt size(s):* \_\_\_\_\_
  - I cannot volunteer all 5 days, but I would like to volunteer 1 or more days. **T-SHIRT SIZE:** \_\_\_\_\_ *List available day(s):* \_\_\_\_\_
  - No, I am not able to volunteer, but I can send snacks for volunteers. NAME: \_\_\_\_\_ EMAIL: \_\_\_\_\_
  - No, I am not able to volunteer, but I can help with prep-work and decorating & save 50% on my registration fee. We will be doing prep-work the week before VBS. NAME: \_\_\_\_\_ EMAIL: \_\_\_\_\_
- Please circle the times/days that you can help. Monday AM or PM Tuesday AM or PM Wednesday AM or PM Thursday AM or PM Friday AM

**WAIVERS:**

I give permission for my child/children (named above) to participate in VBS at Christ the King Church. I will not hold Christ the King, its employees or volunteers liable if any harm should occur to my child/children. If an emergency arises regarding my child/children, I give permission for medical treatment to be administered.

My medical insurance coverage and number is: \_\_\_\_\_

Special Needs (Medical, Physical Disabilities, Learning Disabilities) \_\_\_\_\_

I, as the parent/guardian of the individual(s) listed on this VBS registration form, consent to my child/children being photographed, videotaped, audio recorded or otherwise recorded by Christ the King Parish or any of its affiliates. I further authorize publication of such items in the parish newsletter and other community media including the Baldwin Press Register, Gulf Coast Newspapers, and The Catholic Week.

\_\_\_\_\_  
Parent/Guardian Signature Date

**For Office Use Only**

**REGISTRATION**

*(\$15 per child, up to \$45 per family)*

Number of Children Registered: \_\_\_\_\_

Registration Payment Due: \$\_\_\_\_\_

**TOTAL PAYMENT DUE:** \$\_\_\_\_\_

- Check # \_\_\_\_\_
- Cash
- Volunteer