

VBS ENROLLMENT FORM 2022
Grace Baptist Church June 12-16, 2022



To whom it may concern,

As the parent or legal guardian, I with my signature do hereby assert, that in the emergency during the time that my child is under the supervision of Grace Baptist Church (GBC) Staff - I give permission to (GBC) staff and/or their designee, who is present at the event, to authorize medical treatment for my child.

I also give my permission for the physician and/or hospital selected to hospitalize, treat, or to otherwise procure proper and appropriate treatment for my child. I fully understand that I am responsible for any bills related thereunto. In addition, I hold GBC, and all church representatives harmless of any and all liability related to any injury incurred during my child's involvement in any Vacation Bible School event.

Child's Name (print legibly)

Address: (Street, City, State & Zip):

() _____
Telephone Number

Age

Male or Female
(circle one)

Grade just Completed (if School Age): _____

Birthdate: _____

Church You Attend

Medical History (allergies, etc):

Person to contact in case of emergency

() _____
Telephone number

Relationship to Child: _____

Parent/Guardian Signature: _____



Classroom Instructions: Record the appropriate information from this Enrollment Form onto your "Enrollment & Attendance" form, then give this form to the VBS office for filing.