

Lutheran Church
of the
Good Shepherd
Vacation Bible School

June 28 – July 2, 2010

Camp Cost

Pre-K/Kindergarten (age 4 by July 1)

9:00 am to NOON

\$25 before June 13

\$35 after June 13

Grades 1– 6

9:00 am to 3:30

\$50 before June 13

\$60 after June 13

Church Membership: _____

If none, are you interested in a church visit or conversation with a pastor? _____

No one will be turned away for financial reasons. Check here if you need help paying or are interested in a payment plan. _____

DEADLINE for EARLY Registration is June 13

Checks payable to Lutheran Church of the Good Shepherd or LCGS

Return all forms and payment to:

Good Shepherd VBS

Attn: Missy Tade

1601 North Street SE

Olympia, WA 98501

Vacation Bible School Registration & Health Form

Name _____ Birth Date _____
Last First

Home Address _____
Street Address City State Zip

Email Address _____

Entering Grade Sept. 2010 _____ Gender: Male Female

Custodial Parent/Guardian _____

Daytime Phone _____

Home Address (if different) _____
Street Address City State Zip

Second Parent/Guardian or emergency contact _____

Daytime Phone _____

Insurance Information

Is the Camper covered by family medical/hospital insurance? Yes No

If so, indicate carrier or plan name _____ Group # _____

Health History

Allergies

Medication: _____

Food: _____

Other: _____

Medications

Please List any Current Medications w/Dosage

Medication 1 _____
Name of Med Dosage

Medication 2 _____
Name of Med Dosage

Activity Restriction: Please list any restrictions and/or limitations to physical activities (i.e. pre-existing conditions)

Name of family Physician _____ Phone _____

Address _____

This form is complete and accurate to my knowledge. The participant has permission to partake in all activities unless otherwise noted.

Signature of Parent or Guardian _____
Date _____

This Health Form will be used for informational and emergency purposes only.

Vacation Bible School Liability Release

Liability Release: I have requested that Lutherwood enroll my child as a participant in an activity based trip or program. As a condition of allowing my child to participate in this camp or activity, I, the undersigned, do hereby agree to the following: I understand that my child can expose him/her to dangers both from known risk and unanticipated risk. Acknowledging that such risk exists, I hereby release and discharge Lutherwood and its officers, agents, and employees from any claims or liability for personal injury or property damage that my child may suffer while attending this camp, program, or activity. This includes but is not limited to, any claim arising out of any condition of the premises at which the camp, program activity is held or the conduct of any person in connection with the preparation for, supervision of, or conduct of any activity, whether planned or unplanned, in connection with the camp or program. I specifically agree to release and hereby release Lutherwood and its officers, agents, and employees of Lutherwood for any negligence of Lutherwood or the officers, agents, or employees of Lutherwood.

Signature of Parent or Guardian:

Date:

Off Camp Release: I give permission for Lutherwood to provide transportation for my child in order to participate in programs conducted off the camp's grounds, when applicable. It is understood that these programs are fully supervised by qualified camp staff.

Signature of Parent or Guardian:

Date:

Publicity Release: Permission is hereby granted to use photos of, quotes from, or likeness of me or my child in print or electronic media for publicity purposes for and by Lutherwood and the Lutheran Church of the Good Shepherd. Any claim or right is hereby waived to any royalty or fees that might be applicable for the use of such images, quotes, or likeness.

Signature of Parent or Guardian:

Date: