



Participant Registration Form

Dates / Location: **June 27th to July 1st, 2022 @ Schmelzer's Grove - 5:30-8:00 p.m.**
9960 Sacred Heart Road, Bremen, Ohio Sarah Borah – VBS Coordinator 740-974-5925

Please return completed form by: **JUNE 17, 2022** – Mail to: 7735 Richland Rd., Rushville, OH 43150 or
email to: st_marybremenPSR@gmail.com

Child's Information:

Name: _____

Gender: M F Age: _____ Grade completed: _____

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

Allergies or medical conditions: _____

What parish do you attend: _____

Family Information:

Parent/Guardian Name: _____

Address: _____

Phone Numbers:

Home: _____ Work: _____ Cell: _____

Emergency Contact:

Name: _____ Phone: _____

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