



Vacation Bible School
July 17-21, 2017 9am to Noon

Youth VOLUNTEER Registration Form

Child Name: _____

Volunteer position you'd like to help with:

- Crew Leader**
- Crew Leader in Training**
- Station Assistant** (check one if you have a preference)
 - Imagination Station
 - Games
 - Bible Discovery
 - Kid Vid Cinema
 - Snacks

Home Congregation: _____

Age: _____ Last school grade completed: _____

Name of Parent(s)/Guardian(s): _____

Address: _____

Email: _____

Emergency contact (during VBS hours): _____

Emergency contact phone number: _____

Allergies/Medical conditions: _____

I give my child _____ permission to participate in all Vacation Bible School activities, which may include being photographed or videotaped. I also give my permission for my child to receive emergency medical treatment if I cannot be reached.

Signature of Parent/Guardian

Printed Name of Parent/Guardian

Date

Registration Fee: \$10 to cover materials and supplies

Please make checks payable to **Our Saviour's Lutheran Church** and mail with the registration form(s) to:

Our Saviour's Lutheran Church, 160 Hill Farm Road, Fairfield, CT 06824