

# \*\*\*\*\* Vacation Bible School 2018! \*\*\*\*\*

## August 6-10 at Immanuel Lutheran Church

Ages 3 - Kindergarten: 9 am - 12 Noon

1<sup>st</sup> Grade - 6<sup>th</sup> Grade: 9 am - 2 pm (9-12 Noon on Friday)

1<sup>st</sup> - 6<sup>th</sup> graders...make sure you bring a lunch!

Those entering 1<sup>st</sup> - 6<sup>th</sup> grades will be led by counselors from Luther Park Bible Camp (LPBC), and those in preschool - KG will be led by Caring Adults from Immanuel Lutheran Church. We will sing, play games, share Bible stories, and make crafts. All are welcome - bring a friend!

**Registration Cost: Suggested donation of \$25 per child**

\*Scholarships are always available - talk to Alyssa



# Come to VBS!

**Registration Deadline: Sunday, July 22, 2018**

*Note: Luther Park VBS T-Shirts will be available for purchase (cost is usually around \$10) during the week*

Child's Name \_\_\_\_\_

2018/2019 Grade \_\_\_\_\_ Age \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Child's Name \_\_\_\_\_

2018/2019 Grade \_\_\_\_\_ Age \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Child's Name \_\_\_\_\_

2018/2019 Grade \_\_\_\_\_ Age \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Child's Name \_\_\_\_\_

2018/2019 Grade \_\_\_\_\_ Age \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Parent Name(s) \_\_\_\_\_

Number to reach you during VBS \_\_\_\_\_

Email \_\_\_\_\_

## Helping Hands Needed!

Volunteer Name(s) \_\_\_\_\_

Please indicate ways you would be willing to help:

- I would like to help provide a snack for the children.
- I would like to provide housing for (3) LPBC Counselors.
- I would like to provide a lunch for LPBC counselors for one day.
- I would like to have the LPBC Counselors over for supper.
- I would like to support the VBS program by making a monetary donation of \$\_\_\_\_\_
- I would like to volunteer my time. I am available the following days/times to help:

### PERMISSION AND MEDICAL AUTHORIZATION

\_\_\_\_\_ has my permission to take part in the Luther Park Bible Camp (LPBC) VBS program on August 6-10 at Immanuel Lutheran Church. I hereby authorize any recognized adult leader of the event to give medical treatment after consulting a medical doctor and making every attempt to contact me as soon as possible. I retain the responsibility for any and all bodily injury, loss, or damage of personal property while en-route to, from, and during VBS. I waive any claim against LPBC and the church and/or its personnel for any lost articles; for any injury to my minor child; and/or any injury to myself. The church assumes secondary insurance coverage. I assume primary coverage. By signing below, I give permission for photographs/video including my child to be used in the promotion of Immanuel Lutheran Church, LPBC and/or the ELCA. I also understand the LPBC does not allow the use of any electronic devices except cameras and I certify that I have ensured my child's compliance with this policy.

\_\_\_\_\_  
(Parent/Guardian Signature)

\_\_\_\_\_  
(Date)

**If any person besides the child's parent will be dropping off or picking up the child, please provide that person's name/phone number:**

\_\_\_\_\_  
**All participants must have an up to date  
Participant Information Form on file with Alyssa –  
if you're not sure, just ask!**