

Highland Community Church

Marathon Campus VBS

2018 Registration Form

1005 N 28th Ave- Wausau, WI 54401~715-842-5683

VBS week: June 25 – 28 from 12:30 pm to 3:15 pm

Thursday Family Hot Dog Supper 6:00 pm

If ordering a t-shirt, return completed form to church office by **May 1**.



Parent/Guardian Name _____

Street Address, City, Zip _____

E-mail Address _____ Home Church _____

Phone Number: Cell _____ Home _____

First Child's Information

Name _____ Male Female

Date of birth _____ Age on June 25, 2018 _____ Grade in Fall 2018 _____

Allergies/Special Needs _____

Second Child's Information

Name _____ Male Female

Date of birth _____ Age on June 25, 2018 _____ Grade in Fall 2018 _____

Allergies/Special Needs _____

Emergency Contact

Name _____ Phone _____

Dismissal Information

Name(s) of person(s) who may pick up my child(ren) from VBS _____

**** My child/ren will be riding the bus _____ to the Marathon Campus from Marathon Elementary _____ from the Marathon Campus to Marathon Elementary. Please initial _____**

T-Shirt: (If registering prior to May 1)

Do you want a *Shipwrecked* VBS T-shirt for your child (cost is \$6 due with this form)? Yes No
Size (circle one): XSmall (4-5) Small (6-8) Medium (10-12) Large (14-16) Adult Small

CD: Would you like to Pre-Order a Music CD of *Shipwrecked* VBS (cost is \$7 due with this form)? Yes No

Photo Release: Can your child(ren) be photographed and the picture appear in church news articles in print and on the internet? (Circle one :) Yes No

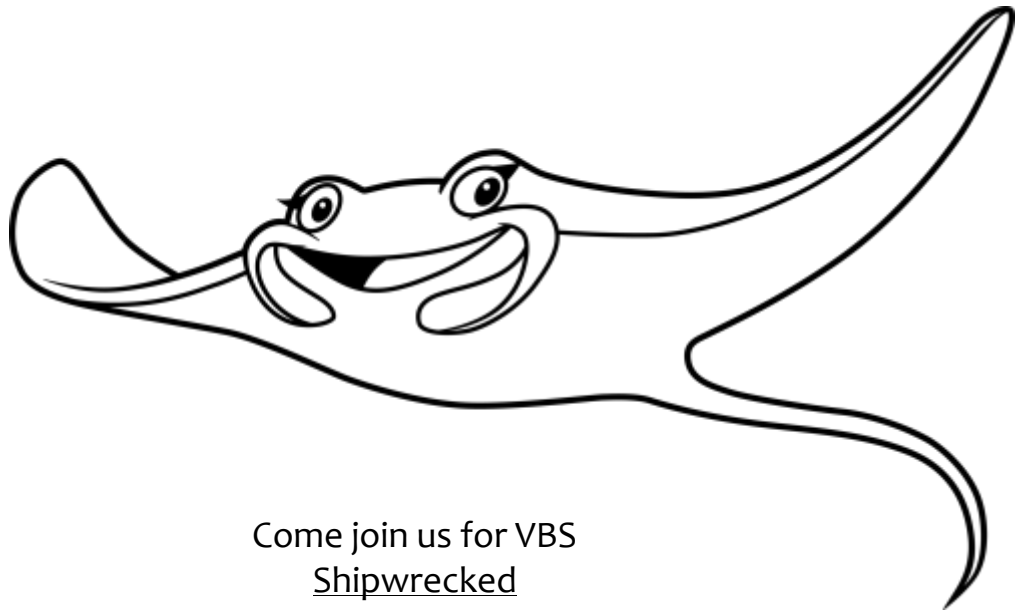
If No: Can we take a picture with the group for the teacher? Yes No
 Can we use the picture in a video at the end of the week for parents? Yes No

I/We the undersigned have legal custody of the student named above, a minor, and have given our consent for him/her to attend and participate in events being organized by the children's ministry at Highland Community Church. I/We understand that there are inherent risks involved in any ministry or athletic event, and I/We hereby release the Church, its pastors, employees, agents, and volunteer workers from any and all liability for any injury, loss, or damage to person or property that may occur during the course of my/our child's involvement. In the event that he/she is injured and requires the attention of a doctor, I/We consent to any reasonable medical treatment as deemed necessary by a licensed physician. In the event treatment is required from a physician and/or hospital personnel designated by the Church, I/We agree to hold such person free and harmless of any claims, demands, or suits for damages arising from the giving of such consent. I/We also acknowledge that I/we will be ultimately responsible for the cost of any medical care should the cost of that medical care not be reimbursed by the health insurance provider.

***Parent/Guardian signature:** _____ **Date:** _____

This is not a Marathon School District sponsored activity and the opinions expressed are not necessarily those of the school district or its personnel.

Other Information (church use only): T-Shirt paid? Y / N Cash/Check # _____ CD paid ? Y / N



Come join us for VBS
Shipwrecked

Where: Highland Community Church
800 River Road, Marathon, WI

Cost: FREE

When: June 25 - 28, 2018

Time: 12:30 – 3:15

Who: Children ages 4 (by July 23) to
5th Grade (in fall)

