

Vacation Bible School Registration Form

Name _____

Date of Birth _____ Grade Going Into _____ Age _____

Parent/ Guardian _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____ E-Mail _____

Emergency Contact Name and Number _____

Special Needs/ Allergies

☐ I would like to have a conversation with a VBS Leader regarding my child's needs.

Photo or Video Release:

If you are willing to allow us to use a photo or video clip of your child for church promotions, newsletters, web site, bulletin boards, etc., please sign below in order to grant us permission. Thank you for your support of CPC.

I hereby grant Covenant Presbyterian Church and its employees and agents permission to photograph my child and use the photo or digital reproduction or video in any or all of its publications including web-site. I authorize Covenant Presbyterian Church to edit, alter, copy, exhibit or distribute this photo or video for the purpose of publicizing Covenant Presbyterian Church's programs.

Parent/Legal Guardian Signature _____ Date _____

Vacation Bible School

June 10 - 14, 2019

Covenant Presbyterian Church

6695 Mae Anne Avenue

Reno, NV 89523

746-8118

www.covenant-reno.org



Schedule

5:45 pm Registration & Check In

6:00 pm Program Starts

8:00 pm Program Ends

*Free if registered by June 1st. After June 1st the cost will be \$5 per child.

Free! *

Bring your Friends!

Free! *