## Virtual Vacation Bible School Registration 2021 Name Date of Birth \_\_\_\_\_ Age \_\_\_\_ Age \_\_\_\_ Name Date of Birth \_\_\_\_\_ Grade Going Into \_\_\_\_\_ Age \_\_\_\_ Name Date of Birth \_\_\_\_ Grade Going Into \_\_\_\_ Age \_\_\_\_ Name Date of Birth \_\_\_\_ Grade Going Into \_\_\_\_ Age \_\_\_ Parent/ Guardian Address City State Zip Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_ E-Mail \_\_\_\_ .Photo or Video Release: If you are willing to allow us to use a photo or web site, bulletin boards, etc., please sign besupport 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 website. 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

## **Online Virtual Vacation Bible School**

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