



“HOLY WATERS!”
St. Rose Vacation Bible School
July 17 - 21, 2017 900 AM – Noon
Registration Form



\$20.00 / Family Registration Fee
For age 3 (out of diapers) thru 5th grade (2017-2018)

Parent(s) Full Name: _____ (Mom)

_____ (Dad)

1st Child's name: _____ Age: _____ Grade entering in Fall: _____

2nd Child's name: _____ Age: _____ Grade entering in Fall: _____

3rd Child's name: _____ Age: _____ Grade entering in Fall: _____

4th Child's name: _____ Age: _____ Grade entering in Fall: _____

Home Church / Religion: _____ / _____

Allergies, medical conditions, other issues the child is dealing with that we should know about:

Address: _____

Phone: (____) _____ (home) (____) _____ (cell)

(____) _____ (work)

In case of emergency, we will try to contact you using the numbers listed above. However, please provide another contact person's name and phone number:

_____ (____) _____

Permission is granted for the above named student(s) to participate in this program. The program sponsors, other employees, and adult agents of St. Rose of Lima Catholic Church, Franklin, IN, are herewith given the following authority for the duration of the student's participation in the program.

In the event of an emergency that requires immediate medical attention and/or treatment, consent is given for the adult agents of the above listed sponsoring organization to act in place and with the same authority as lawful parent or guardian.

Further, in consideration of the services performed by the program sponsors, other employees, and agents of St. Rose of Lima Catholic Church, Franklin, IN, are herewith released from liability for all actions taken in good faith during the event.

PARENT OR LEGAL GUARDIAN SIGNATURE: _____

DATE: _____

Please return form and fee no later than July 10th.
Make checks payable to St. Rose Church.
Volunteers and food donations needed.
Point of Contact: Julie Haney, 317 736-6754

