



# Highland Community Church

## Marathon Campus VBS

### 2019 Registration Form

1005 N 28<sup>th</sup> Ave- Wausau, WI 54401~715-842-5683

VBS week: June 24 – 27 from 12:30 am to 3:15 am

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

Parent/Guardian Name \_\_\_\_\_

Street Address, City, Zip \_\_\_\_\_

E-mail Address \_\_\_\_\_ Home Church \_\_\_\_\_

Best number to reach you at during VBS: \_\_\_\_\_

#### First Child's Information

Name \_\_\_\_\_  Male  Female

Date of birth \_\_\_\_\_ Age on July 22, 2019 \_\_\_\_\_ Grade in Fall 2019 \_\_\_\_\_

Allergies/Special Needs \_\_\_\_\_

#### Second Child's Information

Name \_\_\_\_\_  Male  Female

Date of birth \_\_\_\_\_ Age on July 22, 2019 \_\_\_\_\_ Grade in Fall 2019 \_\_\_\_\_

Allergies/Special Needs \_\_\_\_\_

#### Emergency Contact

Name \_\_\_\_\_ Phone \_\_\_\_\_

#### T-Shirt: (If registering prior to June 1)

Do you want a Roar 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 Roar 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: \_\_\_\_\_

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



Come join us for  
**VBS Roar 2019**

**Where:** Highland Community Church  
800 River Rd, Marathon WI

**Cost:** FREE

**When:** July 24-27, 2019

**Time:** 12:30 a.m. – 3:15 a.m.

**Who:** Children ages 4 (by July 22) to  
5th Grade (in fall)