

**First Baptist Church of Ashburn  
2019 Summer Registration Form  
Youth / Children / VBS**

Name: \_\_\_\_\_ I preferred to be called: \_\_\_\_\_

Birthday: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ **(Youth Only)** Cell Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
(Parent/Guardian will receive the same text message)

(Youth Only) Do You Text \_\_ Yes \_\_ No If so what carrier \_\_\_\_\_ (ex: Verizon, AT&T, etc)

Current School: \_\_\_\_\_ Current Grade Completed \_\_\_\_\_

Allergies: \_\_ Yes \_\_ No If checked please specify: \_\_\_\_\_

Any other medical issues: \_\_\_\_\_

**PARENT CONTACT:**

Mother's Name/Female Guardian: \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email: \_\_\_\_\_

Father's Name/Male Guardian: \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email: \_\_\_\_\_

**EMERGENCY CONTACT:**

*Please list an individual and phone number other than any that appear above.*

Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Relationship To Child/Teen: \_\_\_\_\_

**Permission For Medical Treatment, Photograph/Video Notice, and Release and Indemnity**

My permission is granted for the church, church official, event staffer, or adult present or in charge of First Aid, to obtain necessary medical attention in case of sickness or injury to my child. Also, I understand that as a participant, my child may be photographed or videotaped during normal church or event activities and these photos/videos may be used in promotional materials. I, the undersigned, do hereby verify that the above information is correct and I do hereby release and forever discharge First Baptist Church of Ashburn or event Sponsors from any and all claims, demands, actions or causes of action, past, present, or future arising out of any damage or injury while participating in activities. Permission includes transportation provided by the church.

Complete and sign below (youth under 18 years of age requires Parent/Legal Guardian signature)

This form covers all events for the summer 2019

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_