

REGISTRATION

Hi and blessings!

It's wonderful to have you at Vacation Bible School (VBS), "So Safari 2019", from October 14-18, 2019 at Saint Paul Missionary Baptist Church to participate in the First Annual Fall Break Vacation Bible School. All students from Pre-K (age 4) through High School are eligible to participate.

Anyone wanting to attend VBS must register either online or through a church. To register to attend VBS, please either contact a participating church, or connect with Saint Paul Missionary Baptist Church (SPMBC) either by phone (520-480-5809) or through the church website (www.spmbcsv.com) and click the VBS icon.

Your packet contains everything you want to know for you to have a successful VBS experience.

Dear VBS-er/Parent and/or Guardian,

This form is being provided to you by your church and St. Paul Missionary Baptist Church to register and give permission for yourself and/or your child to attend the 2019 Fall Vacation Bible School (VBS). This form must be completed and returned to your local church prior to attending Orientation. Return the entire packet to your local church or Saint Paul Missionary Baptist Church (SPMBC).

Student Information

Student's Name: _____
Student's Age: _____
Last Grade Completed (in May 2019): _____
Is the Student Baptized? _____

What to Bring to VBS

Good Behavior A Bible and a writing utensil Light Jacket (in case it gets windy)

Saint Paul Missionary Baptist Church, Sierra Vista, Arizona,
227 North Carmichael Avenue, Sierra Vista, Arizona 85635
Vacation Bible School*October 14 – 18, 2019
Phone: 520-458-5809;email: youth@spmbcsv.com or info@spmbcsv.com
Pastor Shawn L. Buckhanan, I, Senior Pastor
Youth Pastor Michele Cotton, VBS Coordinator

Activities Permission Slip/ Waiver

Dear Camper/Parent and/or Guardian,

This form is being provided to you by your church and the Saint Paul Missionary Baptist Church of Sierra Vista, Arizona to determine which special activities you can participate in. Parents/Guardians, please read carefully, note and sign. This completed form must be turned in prior to participating in Vacation Bible School.

VBS Student Information

Student's Name: _____

Student's Age: _____

Current Address _____

Special Activities (please check which activities you give your child permission to participate in)

Movie Outing: _____ Park Playground: _____ Sports: _____

Does your child have a library card (yes or no) _____? Do you give permission for your child to obtain a library card?

Waiver information and statement: By signing below, you, the parent/guardian, understand that you are granting permission for your child to participate in the above listed activities and hereby do hold harmless the Saint Paul Missionary Baptist Church, City of Sierra Vista, its VBS workers, chaperones, teachers, volunteers or any other agent from any and all liability.

I _____, grant my child _____ permission to participate in the above marked activities with the full understanding of the nature of the occasions, sporting events, and/or other activities.

Signature of Parent and/or Guardian

Date

Administrative use only:

Received by: _____

Additional Fee for _____ paid: _____

Cash _____ Check # _____ Cashier's Check # _____ Money Order# _____

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Questionnaire and Release for Medical Treatment

VBS-er's Name: _____

VBS-er's Age _____

Dear Camper/Parent and/or Guardian,

This form is being provided to you by your church and the Paradise Missionary Baptist State Convention of Arizona for medical treatment during the Vacation Bible School. This form must be completed and returned prior to VBS participation. Please note that St. Paul and VBS staff will **not** dispense medications.

To the Medical Staff, I, the undersigned, do hereby declare that I am the parent and/or legal guardian of the VBS student listed below. I give you full authorization to treat my child in the event of a medical emergency. The following is being provided to assist with treatment:

1. All Known Allergies:

2. All Known Medical Problems:

3. All Known Medications Camper is Currently Taking:

4. Is the camper able to dispense their medications on their own? _____

5. Are all Required Immunization Records up to date, including Tetanus? _____

6. Please list any behavioral challenges or concerns that church and camp staff should be aware of.

Please note that this information will be kept confidential.

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PARENT EMERGENCY RELEASE FORM – VBS 2019 Please Print

I _____
authorize my son/daughter _____ to travel with the St. Paul
Missionary Baptist Church Vacation Bible School (VBS), Monday, October 14th through Friday, October
18th, 2019. I authorize any staff member or chaperone from the Saint Paul Missionary Baptist Church
Vacation Bible School to administer medical first aid or any procedure necessary at or from any licensed
medical facility physician's office. I will be responsible for any medical expenses, and/or property
damage incurred.

_____ Child's Last Name (Please Print)
_____ First _____ Middle
Parent/Child's Current
Address _____
City _____ State _____
ZIP _____ Birthdate: _____ Male _____
Female _____ Home Phone _____
Parent's Signature _____
Date _____
Person(s) to call in case of emergency:

Name/Relationship _____

Telephone E-mail (optional) _____

Name/Relationship _____
Telephone E-mail (optional) _____

Instructions for emergency treatment or Hospital/Emergency Care at my expense (In case Parent or
Guardian can't be reached)

Doctor to be called in an emergency:

Name _____

Phone _____

Hospital Preference: Name _____

Address _____

Allergies, Medications or Special Health Problems:

Primary Insurance Carrier: _____

Insurance: _____

Name _____

MR _____ ID # _____

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VBS Student Contract

VBSe's Name: _____ VBSe's Age: _____

To my church, family and guardians,

I, the undersigned, do hereby declare that I will abide by the rules stated in this VBS contract to the best of my ability, knowing that I am not only representing myself, but my parents and church family.

1. Electronic devices are allowed. However, electronic devices will be confiscated if they interfere with participation or are used inappropriately.
2. All adult chaperones will be treated with Christian love, respect and dignity, always. In return, the same will be given to all VBS-ers.
3. Directions from VBS Staff, interns, adult advisors and chaperons will be followed.
4. Practice the 10 Commandments while at VBS.
5. VBS-ers **ACT! Are Respectful and Trustworthy, Care about each other, and Take Responsibility.**
6. VBS-ers are not permitted to leave the grounds, without direct supervision from your VBS staff, chaperone, or supervisor. *There are NO EXCEPTIONS.*
7. VBS-ers are responsible for keeping up with all their belongings.
8. VBS-ers are to treat the sites with respect and as if it is their own, returning items to their proper place and cleaning up behind themselves.
9. Above all, VBS-ers should remember that this is Vacation Bible School, and we are here to have fun.

Signature of Camper

Date

Signature of Parent and/or Guardian

Date