

# Incredible Race VBS Registration Form

June 17<sup>th</sup> - 21<sup>st</sup> ~ 9am-noon ~ \$18 per child

Child's name \_\_\_\_\_

Gender: Male \_\_\_ Female \_\_\_ Birthdate \_\_\_/\_\_\_/\_\_\_ Age Now \_\_\_ Entering grade \_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_ Zip \_\_\_\_\_

Parents/Guardian \_\_\_\_\_ Phone \_\_\_\_\_

Email \_\_\_\_\_

Emergency contact \_\_\_\_\_

Relationship to child \_\_\_\_\_ Phone \_\_\_\_\_

Who can pick up your child? \_\_\_\_\_

Name of home church \_\_\_\_\_

Food allergies Y \_\_\_ N \_\_\_ List \_\_\_\_\_

Medical concerns Y \_\_\_ N \_\_\_ Explain \_\_\_\_\_

**Shirt Size** \_\_\_\_\_

## Permission to use Images and Video

I hereby **grant** \_\_\_ **do no grant** \_\_\_ permission for Gateway Church to record sounds, images, or video of my child \_\_\_\_\_ while attending the Incredible Race VBS

program. I also give permission for Gateway Church at its sole discretion, to use these sounds, images, or videos in publications (including print, websites, and social media platforms) owned by Gateway Church in relation to the Incredible Race VBS program.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date



**Please fill out form and either drop off at the church or email completed form to [brittany@gatewaychurchco.org](mailto:brittany@gatewaychurchco.org)**