



Vacation Bible School Registration & Volunteer Form

August 8-12, 2010
Any student going into 1st-6th Grade
\$5/student suggested donation

Mother/Guardian	Father/Guardian
<i>first last</i>	<i>first last</i>
Address	Address
City Zip	City Zip
Phone (home)	Phone (home)
(work)	(work)
Place of work	Place of work
e-mail address	e-mail address
Member of First Ev. Lutheran? Please circle one: Yes No Pending	Member of First Ev. Lutheran? Please circle one: Yes No Pending

Join the fun by volunteering!

Write your name to volunteer in a blank below (for Grade 7 to Adult)

- _____ Help counselors with camp activities
- _____ Provide Breakfast for counselors
- _____ Provide Lunch for counselors
- _____ Provide Dinner for counselors
- _____ Provide Housing for counselors (Sunday –Wednesday...one or more nights)
- _____ Help organize Family potluck Thursday night

Authorization for Participation

I hereby give my permission for my child to participate in any activity and field trips planned by the staff for Vacation Bible School. I also authorize delivery of necessary emergency care for my child by available medical personnel, and for my child to be photographed for possible inclusion in First Lutheran promotions.

Signature (Parent's or Guardian's)

Date

Reverse side of form must also be completed