



FIRST LUTHERAN CHURCH
Sharing Christ's Love

Vacation Bible School
Beach Party—*Surfin' Through the Scriptures*
August 4-8, 2008

Name _____ Birth Date _____

School grade just completed _____ Email _____

Street Address/City _____ / _____

Home Phone _____ Cell Phone _____

Parent(s) Name(s) _____

In case of emergency, contact _____

Allergies or other medical conditions _____

Name of home church, if any _____

Medical Release:

I (we) the undersigned parent(s) or guardians(s) of _____ a minor, do hereby authorize adult volunteers of First Lutheran Church for the undersigned to consent to any medical or surgical care deemed advisable by any accredited physician or surgeon in an approved emergency clinic or hospital. I further release from any liability First Lutheran Church any of its ministries or leaders in the event of an accident. This agreement does not apply to claims for intentional misconduct or gross negligence.

Signature (of parent/guardian)

_____ (initial) I give my permission for my photographed image (or the photographed image of my minor child named here _____), to be displayed on www.firstgeneseo.org. I understand this site is designed for both member information and community publicity purposes.

_____ (initial) I give my permission for my full name and home telephone number to be displayed on the First Lutheran Church Web site in relation to a church ministry and/or activity. I understand this site is designed for both member information and community publicity purposes.

Signature (of parent/guardian)

Date