

THE CHURCH OF SUTERSVILLE

VBS REGISTRATION FORM 2025

MONDAY, JUNE 23RD to FRIDAY, JUNE 27th

— PLEASE PRINT CLEARLY SO THAT WE CAN READ WHAT YOU'VE WRITTEN! —

Child/Youth's Name _____

Age _____ Date of Birth _____ Grade Completed _____

Address _____

City, State, Zip _____

Home Phone _____ Cell Phone _____

Emergency Contact Number _____

Special Needs / Allergies _____



I, _____ (Parent/Guardian's Name) give my

permission for _____ (Child's Name)

To attend Daily Vacation Bible School at the Church of Sutersville. I will not hold The Church of Sutersville and/or any individual associated with their VBS responsible for any injury my child may incur before, during, or after Daily Vacation Bible School.

I also hereby grant permission to The Church of Sutersville to use any photograph(s) of my child taken during VBS Week on facebook or in other official church printed publications without further consideration. I also understand that once an image is posted on the internet, the image can be downloaded by any computer user, anywhere in the world. Therefore, I agree to indemnify and hold harmless The Church, its trustees, pastor, associate pastors, deacons, website editor, its members and designees from any claims arising out of the use of any of said photograph(s). The Church reserves the right to discontinue use of any photograph(s) without notice.

Signature of Parent/Guardian

Date

Early Registration always appreciated - fill out and mail to:

VBS Registration, c/o Coleen Kudlik • 209 Chopp Street • Sutersville, PA 15083