VBS 2019 Permission Slip and Liability Release Form

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, the parent/legal guardian of (extra spaces have been provided for parents/guardians with more than one child):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, give my permission for my child/children to attend the 2019 Vacation Bible School that will be held at First Baptist Church Valley Mills.

I understand that there are potential risks in this event and do not hold First Baptist Church Valley Mills or it leaders/volunteers responsible or liable for any accidents.

In the event my child sustains an injury while attending Vacation Bible School, I give my permission to whoever is in charge to take whatever steps necessary to stop any bleeding and to administer first aid as needed. I also consent to an X-ray examination, anesthetic, medical (or dental) or surgical diagnosis and treatment and hospital care, and the administration of drugs or medicine to be rendered to my child under the general or specialized supervisor and upon the advice of a duly licensed physician and/or surgeon.

In addition to reading and completing this sheet, I have previously completed the online VBS registration form for my child/children at https://fbcvm.org/vbs

I understand that I will have to enter the sanctuary of the church to pick up my child when VBS has ended everyday at 11:00am.

I also understand that this sheet must be filled out, signed, and turned into the church in order for my child/children to participate in Vacation Bible School. I understand that failure to do so will result in my child being unable to participate in Vacation Bible School.

Signature of Parent/Legal Guardian: Parent/Legal Guardian Phone Number:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:

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