

Central Christian Church  
Tina Miller  
217.428.4336

Holy Cross Lutheran Church  
Amy Zietlow  
217.877.2258

First Lutheran Church  
Kelly Giltner  
217.423.7783



## VACATION BIBLE SCHOOL Registration Form

Please complete and return this form to Central Christian Church by June 4, 2018  
650 W. William Street Decatur, IL [www.cccdisciples.org](http://www.cccdisciples.org)

**June 18-24, 2018**      **K-5th**      **9 am to noon**  
**PreK (2-4) M, W, F**      **9 am to noon**

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

Date of Birth \_\_\_\_\_ Grade last completed \_\_\_\_\_

Name of parent/primary caregiver \_\_\_\_\_

Primary phone \_\_\_\_\_ Secondary phone \_\_\_\_\_

Email \_\_\_\_\_

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

The following have permission to pick up my child: \_\_\_\_\_

Church affiliation \_\_\_\_\_

Friend preference (for group pairing) optional: \_\_\_\_\_

Dietary restrictions \_\_\_\_\_

Medical allergies \_\_\_\_\_

By signing here, I give my permission for my child to attend Vacation Bible School sponsored by Central Christian Church and agree not to hold Central Christian Church or its representatives responsible for any accident or injury that may befall my child in the course of said event.

YES      NO      Initials \_\_\_\_\_

By signing here, I give my permission for my child to be photographed or recorded (audio or video) during youth outings or events sponsored by Central Christian Church. I realize that such photographs might be posted on the church's website and/or social media pages.

YES      NO      Initials \_\_\_\_\_

By signing here, I give my permission for my child name to be printed in reference to pictures of my child posted on the church's website and/or social media pages.

YES      NO      Initials \_\_\_\_\_

**Parent Signature and Date** \_\_\_\_\_