



Oakville Presbyterian Church
2022 Vacation Bible School
June 20 - 24 9:00 am - Noon

REGISTRATION FORM*

Child's Name _____

Child's birth date _____

Last grade child completed in school _____

Parent/Guardian Name _____ Phone _____

Mailing Address _____

Email _____

Emergency Contacts

Name	Relation to Child	Phone number

Medical or other information (including food allergies)

I (parent or guardian of the above-named child), hereby give my permission for his/her participation in the Vacation Bible School sponsored by Oakville Presbyterian Church. I agree that in the event my child is injured as a result of his/her participation in the VBS program, or any of its agents or employees, recourse for the payment of any resulting hospital, medical or related costs will be had against any accident, hospital or medical insurance, or any available benefit plan of mine or my spouse.

Parent/Guardian Signature _____ Date _____

**Please scan and email to email@oakvillechurch.org or send to 29970 Church Drive, Shedd, OR 97377*