



# BackYard Bible Club Summer 2010

Please complete both front and back of this form.

Administrative Use:

Week #1

Week #2

Week #3

Choose One:  July 6-9<sup>h</sup>     July 12-16<sup>th</sup>     July 19-23<sup>rd</sup>  
                                          10am-noon                      10am-noon                      6pm-8pm  
                                          Tuscany Park    Brown's Pt Lighthouse    Heritage Park

Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Grade fall 2010: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Email: \_\_\_\_\_ Gender: M F

Mom's Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Dad's Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Emergency Contact Person (other than parents) \_\_\_\_\_ Phone: \_\_\_\_\_

Medical Conditions and/or Allergies: \_\_\_\_\_

How will the child be going home: (Please Check One)

- Walking Home: Children under 7 years of age must be accompanied by an older child or an adult.
- Parent Pick-up:
- Alternative Pick-up: Name: \_\_\_\_\_ Phone: \_\_\_\_\_

I'd Like to Purchase a T-shirt and/or Music CD — \$5.00 each (Please Check all that Apply)

Child Sized T-Shirt:  S  M  L     High Seas Expedition Music CD (make checks payable to MVPC)

Sign In: (Please initial daily at drop off)    Monday \_\_\_\_\_ Tuesday: \_\_\_\_\_ Wednesday: \_\_\_\_\_ Thursday: \_\_\_\_\_ Friday: \_\_\_\_\_

Sponsored By Marine View Presbyterian Church  
 8469 Eastside Dr. NE Tacoma, WA 98422

**Please Turn Over and Complete the Back Side.**

# BackYard Bible Club

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Date of Club: (Please circle) July 6-9<sup>th</sup> July 12-16<sup>th</sup> July 19-23<sup>rd</sup>

## Parent Permission Slip:

I hereby consent to participation by my child, \_\_\_\_\_, in this activity. I understand that this event will take place away from the church facilities and that my child will be under the supervision of church staff and volunteers. In addition, I agree to indemnify and hold harmless Marine View Presbyterian Church, and its representatives, host families and volunteers, from any and all claims, including negligence, arising from or relating to my child's participation in this event.

Parent/Legal Guardian (sign) \_\_\_\_\_ Date signed \_\_\_\_\_

## Emergency Medical Release:

I (we), the undersigned parent(s) or guardian(s) of \_\_\_\_\_, a minor, do hereby authorize adult volunteers of Marine View Presbyterian Church as agent(s) 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 Marine View Presbyterian Church any of its ministries or leaders in the event of injury during the above mentioned event. This agreement does not apply to claims for intentional misconduct or gross negligence.

Parent/Legal Guardian (print) \_\_\_\_\_ Telephone \_\_\_\_\_

Parent/Legal Guardian (sign) \_\_\_\_\_ Date signed \_\_\_\_\_

Health Insurance Company \_\_\_\_\_ Policy or Group Number \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Does your child have any medical or special needs, including medications currently being used? No \_ Yes \_\_ If yes, please explain: \_\_\_\_\_

## Picture Permission:

I (we), the undersigned parent(s) or guardian(s) of \_\_\_\_\_, a minor, do hereby grant permission for Marine View Presbyterian Church to take and publish pictures of the above mentioned child for use in promoting Children's Ministry programs at Marine View Presbyterian Church.

Parent/Legal Guardian (sign) \_\_\_\_\_ Date signed \_\_\_\_\_

**Marine View Presbyterian Church 8469 Eastside Dr. NE Tacoma, WA 98422 253-927-0557**