



come by faith, grow in grace, go tell others

VBS Registration: Wilderness Escape
August 9-13, 2021

Child's Name: _____
Address: _____
City: _____ ST: _____ Zip: _____
Grade child is going into this fall: _____ Child's Birthday: ____/____/____
Allergies: _____

Wilderness Group:

___ Ages 2-3 ___ Ages 4-Kindergarten ___ Grade 1-2 ___ Grade 3-4 ___ Grade 5-6

Parent/Guardian Name: _____
Address: _____
City: _____ ST: _____ Zip: _____
Cell Phone: _____ Home Phone: _____
Person(s) authorized to pick up child: _____
_____ Phone: _____
_____ Phone: _____

Photo Release – VBS 2021

During VBS photos and videos may be taken of the kids. These may be used for promotion of VBS in our church, other churches in the area, and for fun slide shows for the kids. Pictures of the children WILL NOT be placed online. We will retain this form for our records. You may revise this form at any time.

_____ I DO give permission for Calvary Chapel Salmon and VBS volunteers to use photos or videos of my child to promote VBS.

_____ I DO NOT give permission for Calvary Chapel Salmon and VBS volunteers to use photos or videos of my child to promote VBS.

Parent/Guardian Signature

Date