



Vacation Bible School August 2 – 5th from 5:15 – 8:00 pm
(Grades 3K – 5)

Pack your bags and grab your gear, VBS 2021 is headed to present-day Israel where an epic adventure of discovery awaits. Discover amazing finds and exciting evidence that proves biblical events were not just stories. They really happened! At Destination Dig, we will make dinner and the kids will unearth more than just dirt. They'll discover real-life archaeological finds that have helped to uncover the truth about Jesus.

Want to join the adventure? Complete a registration form for each child and return to church, by July 23, 2021, or sign up online from the church website (www.stjohnpulaskiwi.org).

VOLUNTEERS NEEDED

We are looking for volunteers to make a short-term commitment. If you are willing to help, please reach out by phone / email to Rachael Orlando, Pastor, or contact the Church Office.

VBS Director:

Rachael Orlando P: (920) 822-4505 E: rnorlando1019@outlook.com

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STUDENT PERSONAL INFORMATION: _____
First Name Last Name

ALLERGIES/MEDICAL ISSUES/SPECIAL NEEDS:

OTHER INFORMATION: Participating for Meal: Yes No

_____ Home Church (if applicable) _____ Grade Entering in Fall

PHOTO RELEASE: I hereby grant St. John Church permission to copyright and use photographs/ videos taken at VBS of the minor designated above in any manner or form for any purpose lawful at any time. I waive any right that I may have to inspect or approve the finished product or written copy, that may be used in conjunction therewith, or the use to which it may be applied.

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PARENT PERSONAL INFORMATION

FIRST NAME LAST NAME PHONE NUMBER

ADDRESS EMAIL

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EMERGENCY CONTACT: _____
First Name Last Name

Contact Number Alternate Phone Number

Alternate Pickup Name - First Last Name Alternate Pickup Phone #

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By signing this form you agree to the following:

MEDICAL RELEASE: I give my permission for the VBS staff to administer basic first aid to my child (named above) in the event of an injury. I understand that the VBS staff will contact emergency services in the event of a significant injury and all expenses for such emergency services will be paid by me.

PERMISSION TO ATTEND: I give permission for my child (named above) to attend Vacation Bible School (VBS). I understand that the information I give for this registration will only be used by St. John Church.

PARENT SIGNATURE: _____

DATE: _____