

# AREA VBS June 19 – 23, 2023 9:00 AM – NOON BOLAN, IOWA



(ONE FORM PER CHILD)

Participant's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Age: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Grade Completed: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Transportation Needed: Yes or No

Home Church: \_\_\_\_\_

To whom it may concern:

The undersigned do hereby give permission for our (my) child, \_\_\_\_\_, to attend and participate in activities sponsored by the area churches on June 19-23, 2023

We (I) authorize an adult, in whose care the minor has been entrusted, to consent to any x-ray examination, anesthetic, medical, surgical, or dental diagnosis or treatment, and hospital care, to be rendered to the minor under the general or special supervision and on the advice of any physician or dentist licensed under the provisions of the Medical Practice Act on the medical staff of a licensed hospital. The undersigned shall be liable and agree(s) to pay all costs and expenses incurred in connection with such medical and dental services rendered to the aforementioned child pursuant to this authorization. Should it be necessary for our (my) child to return home due to medical reasons or otherwise, the undersigned shall assume all transportation costs. The undersigned does also hereby give permission for our (my) child to ride in any vehicle designated by the adult in whose care the minor has been entrusted while attending and participating in activities sponsored by the area churches.

Emergency Contacts & Phone Numbers: \_\_\_\_\_

List all allergies or special medical problems your child may have: \_\_\_\_\_

Special friend your child might like to be with: \_\_\_\_\_

Shirt size (circle one) Youth: XS S M L XL

Parent / Guardian Signature: \_\_\_\_\_

Return form to a United Methodist Church in Bolan, Manly, Northwood, Plymouth, Rock Falls, Rudd, Nora Springs; or a Lutheran Church in Manly or Hanlontown

**REGISTRATION FEE HAS BEEN PAID!  
PLEASE PRE-REGISTER  
FOR CREW ASSIGNMENTS  
& MATERIALS**

Or mail to:  
Lori Willert  
4211 Tulip Lane, Kensett, IA 50448  
Questions? Call 641-903-9472 or lwillert@wctatel.net

