

VBS 2026; June 15-19; 8:30 - 11:00
We start and end at the Methodist Church

BRING THIS COMPLETED FORM WHEN BRINGING CHILDREN TO VBS

To register your children for Vacation Bible School please list your children's
NAMES and GRADE COMPLETED (Pre, K, or 1-5) in the form below:

Gender	Names (First & Last)	Grade	Allergies (please list for each child if any)
boy girl	_____	_____	_____
boy girl	_____	_____	_____
boy girl	_____	_____	_____
boy girl	_____	_____	_____
boy girl	_____	_____	_____

Your Name: _____ Relationship to Child(ren): _____

Your E-mail Address: _____

Your Home Address: _____, _____, _____

Your Home Phone #: _____ Cell Phone / Alternate Phone #: _____

Church You Attend: Methodist Congregational Baptist Other None

If "Other", please list _____

Emergency Contact Person: _____

Emergency Contact Phone #: _____

Name of Physician: _____ Physician's Phone #: _____

Medical Insurance Company: _____ Policy #: _____

Consent Agreement - Toulon Community VBS

The parent or legal guardian of the student(s) listed on this form, certify that he/she/they has/have my full approval to participate in the Toulon Community VBS. The individual(s) identified on this form understands that all students are expected to abide by the program rules and be directly responsible to the Toulon Community VBS Leaders.

Further, I do allow Toulon Community VBS and its partnering churches to use photographs and video footage shot at the program of the individual(s) named above for promotional materials.

Further, I do authorize any minister or adult leader, in the event I cannot be reached by phone, to give consent to a physician and/or hospital for emergency medical or surgical treatment while at this event. It is understood that I will assume any financial responsibility for any expense that may be incurred for said emergency treatment.

Further, I do certify that said child(ren) is/are covered by adequate accident insurance. By registering my child(ren) for VBS, I certify that I have read and agree to the information given in this entire form and hereby give my consent to participate.

Signed: _____ Date: _____