

CAVE QUEST 2016

WESTWOOD COMMUNITY CHURCH - VBS July 11th-15th, 2016 - Ages 4-11

Registration Form (one per child):

Child's First & Last Name: _____

Street Address: _____

Home Phone: _____ Birthdate/Age: _____

In case of emergency, contact (name/number): _____

Father & Mother Name: _____ Cell: _____

Other Guardian Name: _____ Cell: _____

Allergies and/or medical conditions: _____

Care card #: _____ Doctors name & phone: _____

Home Church (if applicable): _____ Is this your first VBS? (yes or no): _____

Please note:

- Payment is due at time of registration. Cost is **\$40/child** or **\$100/family** (3 or more)
- Cost includes snacks, prizes, and take-homes that will remind your child of their CAVE QUEST adventure!
- Please make cheques payable to Westwood Community Church
- For more information, please contact Meredith at 604-464-0558 or wcc@westwoodcc.ca

Sessions will be from 12:30pm - 3:30pm, Monday, July 11th thru Friday, July 15th

Would you like to be advised of next year's VBS or other children's programs? If so, please provide an e-mail address: _____

Consent Form (one per child):

Child's Full Name: _____

The following guardian(s) are authorized to pickup/drop off my child.

1. Name: _____ Phone: _____ Relationship: _____
2. Name: _____ Phone: _____ Relationship: _____

In case of accident or illness, I hereby authorize qualified staff of Westwood Community Church to administer first aid and/or call an ambulance to take the child to the nearest emergency service. I indemnify and save harmless Westwood Community Church, its employees, administrative board elders and representatives, releasing them from liability.

Parent/Guardian Name: _____ Signature: _____

I hereby give permission for my child to be photographed for church usage or general advertising for the VBS program (initials): _____