



Backstage with the Bible - VBS 2010

July 26-30 | 9:00am - 12noon | Ages 4 through entering 6th Grade | FREE

Parent/Guardian Information

Father's Name _____ cell (_____) email _____
Last First

Mother's Name _____ cell (_____) email _____
Last First

Address _____ phone (_____)
Street City / State Zip

Emergency Contact Name: _____ Phone: _____

Is there a friend they would like to be with? _____

Child's Name	Birthday	Grade in Fall	M/F	Medical Concerns	T-Shirt Size

Waiver of Responsibility

I/we release Grace Bible Church of liability for any injury during Vacation Bible School 2010. I/we give permission for emergency medical treatment in case of illness or injury.

 Signed Date

Photography Waiver

I/we give permission for my children to be in photographs taken during VBS by a Grace Bible Church staff member or other authorized Grace affiliate. These pictures may be used in various Grace Bible Church communications or publicity.

 Signed Date

**How did you hear about this camp?
 (check all that apply)**

We attend Grace Bible regularly
 Friend (who?) _____
 Website
 Event (which one?) _____
 Other _____

For office use only:

Date Entered _____
 Paid _____
 T Shirt _____
 "Backstage Groupie" Number _____

I can:

Help during camp
 Help before camp
 Donate snacks/supplies

Please return this form to:
 Grace Bible Church
 100 Rodeo Drive
 Arroyo Grande
 489-4200
 fax: 489-9296
 www.gracevine.com

