



Christ the King
Vacation Bible School
June 5 - 9
9:15am - 12:15pm
\$65/First Child \$60/Siblings
Registration Form (one per child)

Child's name: _____ Child's gender: _____

Child's age: _____ Date of birth: _____ Last school grade completed: _____

Name of parent(s): _____

Street address: _____

City: _____ State: _____ ZIP: _____

Home telephone: (____) _____

Parent/caregiver's cellphone: (____) _____

Home email address: _____

Home church: _____

Allergies, medical conditions, or special needs. _____



In case of emergency, contact: _____

Phone: _____

Relationship to child: _____

I hereby grant permission for Christ the King to photograph/video my child(ren) while participating in VBS. No names will be used. I agree that I will not seek financial compensation for the use of my child(ren)'s images.

Parent Signature _____ Date: _____



ARCHDIOCESE OF DENVER

RISK MANAGEMENT PROPERTY/CASUALTY INSURANCE TRUST

ACTIVITY RELEASE FOR MINOR PARTICIPANT

Return Completed Form to Parish/School/Ecclesiastical Organization

Participant's Name: _____

Birth Date: _____ Sex: _____

Parent/Guardian Name: _____

Home Address: _____

Home Phone: _____ Work/Cell Phone: _____

I, _____, grant permission for my child,
_____, to participate in the following activities:

Vacation Bible School

As parent and/or legal guardian, I remain legally responsible for any personal actions taken by the above-named minor participant.

I agree on behalf of myself, my child named as minor participant herein, or our heirs, successors, and assigns, to hold harmless and defend Christ the King, its officers, directors, employees and agents, and the Archdiocese of Denver, its employees and agents, chaperones, or representatives associated with the activities, from any claim arising from or in connection with my child participating in the activities, or in connection with any illness or injury (including death) or cost of medical treatment in connection therewith, and I agree to compensate Christ the King, its officers, directors and agents, and the Archdiocese of Denver, its employees and agents and chaperones, or representative associated with the activities for reasonable attorney's fees and expenses which they may incur in any action brought against them as a result of such injury or damage, unless such claim arises from the negligence of Christ the King or the Archdiocese of Denver.

Signature: _____ Date: _____

My child has the following restrictions and/or allergies: _____

With the exception of the above, I hereby warrant that to the best of my knowledge, my child is in good health, and I assume all responsibility for the health of my child.

Signature: _____ Date: _____