

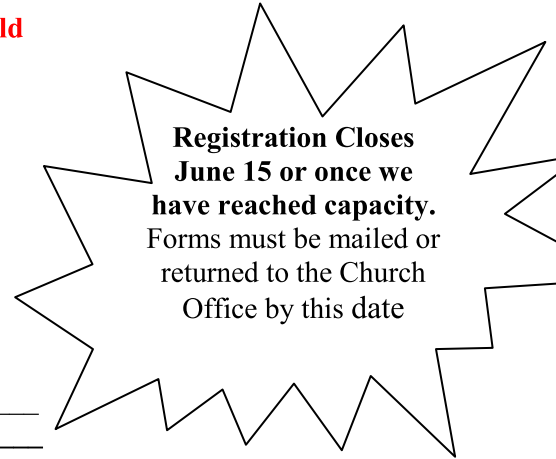
# SKYLAND UMC VBS 2023 CAMPER REGISTRATION FORM



JULY 17-21  
9 am – 12 noon  
Ages 4 – rising 6<sup>th</sup> grade  
(Must be 4 years as of VBS dates)

**NEW FOR 2023 \$5 Registration fee per child  
(\$15 max/family)**

Skyland United Methodist Church  
(828) 684-7283



Child's Name: \_\_\_\_\_ DOB: \_\_\_\_\_

**\*Please complete a separate form for EACH child in your family.**

Age: \_\_\_\_\_ Rising Grade: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

**\*\*Could you volunteer during the week?** \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Daytime phone number(s): \_\_\_\_\_

Home church: \_\_\_\_\_ Allergies/Medical Info/Other: \_\_\_\_\_

Emergency Contacts:

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

Names of person(s) who may pick up this child from VBS each day:

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

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

**Any other information you would like to share about your child that might be helpful to the leaders?**

**Music & T shirt preferences must be turned in by May 30<sup>th</sup> – extras will be available, but preference not guaranteed after this date.**

Which type of music take home would you prefer? \_\_\_\_\_ CD \_\_\_\_\_ link to download songs onto device

T-Shirt size **Toddler** S \_\_\_ M \_\_\_ L \_\_\_ **Youth** S \_\_\_ M \_\_\_ L \_\_\_ **Adult** S \_\_\_ M \_\_\_ L \_\_\_ XL \_\_\_

**Feel free to contact Joy Moss or Jennifer Blanton if you have questions**  
[revjoy@skylandumc.com](mailto:revjoy@skylandumc.com)      [skyumckids@skylandumc.com](mailto:skyumckids@skylandumc.com)

**\*Please see reverse side for "Permission Slip for Photographing Your Child"**

**PERMISSION  
FOR PHOTOGRAPHY, DIGITAL and VIDEO IMAGES**

During VBS week, we may take pictures of children for publicizing our events through media such as our church web-site, church pamphlets, Facebook.

Conditions of Use:

We would use first names only, unless with your express permission.

We will not include details such as full name, address, email address, tel. no.

**I give Skyland United Methodist Church my permission for my child to be photographed, etc. as described by above 'conditions of use'.**

**I do not want my child to be photographed.**

Signed ..... Parent/Guardian\*\*\*

Print Name.....

Date .....