

The U Kids VBS 2018
June 19th—22nd 8:45 am—12 pm
Adult Volunteer Registration Form



Name: _____

Preferred Phone: _____ Email Address: _____

Address: _____ Zip: _____

Adult food allergies and/or special needs: _____

Please circle t-shirt size: AS AM AL AXL AXXL

You must register by 6/5/18 to be guaranteed a t-shirt.

Indicate 1st and 2nd volunteer area preferences:

____ Preschool Crew Leader ____ Elementary Crew Leader Lead your child's class? ____ Yes ____ No If yes, which child? _____

____ Preschool Crafts ____ Preschool Storytelling ____ Preschool Music ____ Preschool Games

____ Elementary Crafts ____ Special Events ____ Snacks ____ Kitchen

****ALL Adult Volunteers MUST have a completed Child/Youth Safety policy on file with
University United Methodist Church.****

Training Dates: ____ Wednesday, June 13th, 9:30-11am **OR** ____ Wednesday, June 13th, 6:30 –8:30pm

Nursery Care will be available for your children or grandchildren under the age of two (as of 9/1/17).

Child's Name: _____

Birth date: ____/____/____ Age (as of 9/1/18) _____

Boy: ____ Girl: ____

Food allergies or special needs: _____

Child's Name: _____

Birth date: ____/____/____ Age (as of 9/1/18) _____

Boy: ____ Girl: ____

Food allergies or special needs: _____

Emergency Contact: _____ Relationship: _____ Phone: _____

Physician's Name: _____ Phone: _____

There is no charge to participate in VBS at The U. If you are able, however, you can make a donation to help offset VBS expenses.

VBS costs approximately \$35.00, per child, for the week.

Donation to help offset the cost of VBS: \$ _____

Emergency Release, Photo Release and Permission Slip

____ In case of emergency, I give my permission to the sponsoring adults to have emergency medical care given to my child(ren). I also release University United Methodist Church and all persons participating in church sponsored activities from any and all liability.

____ I, the undersigned parent(s) or guardian of the child(ren) listed above give University United Methodist Church, San Antonio, Texas, the absolute right and permission to use my child(ren)'s photograph in its promotion materials and publicity efforts. I understand that the photographs may be used in a publication, print ad, direct-mail piece, electronic media (e.g., video, cd-rom, internet) or other form of promotion. I release the Church, the photographer, their offices, employees, agents, and designees from liability for any violation of any personal or proprietary right I may have in connection of such use.

Your response to these questions will not affect your registration whatsoever.

Are you a member of University United Methodist Church? Yes No

If not a member, are you a regular attendee? Yes No

If not, do you currently have a church home? Yes No

If yes, where?

Parent/Guardian Signature

Date