

Welcome to Vacation Bible School

at The First United Methodist Church
July 20-24 6:00 - 8:30 p.m.



Are your kids ready to sink their teeth into BIG fun? That's just what they'll do at Crocodile Dock, where fearless kids shine God's light! Crocodile Dock is filled with incredible Bible-learning that kids see, hear, touch, and even taste! Bible point crafts, team-building games, cool Bible songs and tasty treats are just a few of the Crocodile Dock activities that help faith flow into real life. Plus, we'll help kids discover how to see God in everyday life - something we call God Sightings.



Sign up today and your child will be talking about it for years to come!

Reduced Registration Fee is \$15.00 per child ages 5-10

Large family discount: Once you have registered two siblings the remainder are free of charge.



Please make checks payable to FUMC Dundee.

First 10 families who register will receive a Swamp Stomp Music CD free (an \$8 value!)

This Dock Rocks with:

- God Sightings
- Love for Jesus
- Daily Bible Points
- Mind-blowing Bible Adventures
- Bible Memory Buddies
- Swamp Stomp Music
- T-shirt
- Activity Book with Stickers
- Lip-smacking Snacks
- Chadder's Video Bayou Adventure
- Wild Gator Games
- Amazing Crawfish Crafts
- Comfort Critters Mission Project



Fill out a registration form today (available on VBS bulletin board or thru church Web site) or see one of the Directors to volunteer or for more information on Discovering Jesus' Miraculous Power! We look forward to seeing you there!



*Your Bayou Crew,
Cris Nilson
Laura Miller
Kelli Hager*

Participant Registration Form for Vacation Bible School

The First United Methodist Church
318 West Main Street, West Dundee, IL 60118

Church Telephone: 847-426-2113 E-mail for Vacation Bible School: vbsdundee@yahoo.com

Child's First Name: _____ Child's Last Name: _____

Name of Person Enrolling Child: _____ Home Phone: _____
(This person should be the legal guardian or the parent recognized by the court as the custodial parent.)

Parent/caregiver's cell phone: _____ Home e-mail address: _____

Address: _____ Apt/Unit: _____ City: _____ Zip: _____

Gender: Male or Female Date of Birth: _____

Grade entering Sept. 2009: (circle one) K 1 2 3 4 5 6 other:

Shirt Size: (circle one) X-Small (4) Small (6-8) Medium (10-12) Large (14-16) Extra Large

Allergies/Medical or Behavioral Conditions and Concerns: _____

Mother: _____ Father: _____

Emergency contact Name: _____ Emergency contact Number: _____

Emergency contact Relationship: _____ Have you ever been to a VBS? Yes or No

Do you have a home church? _____

How did you hear about us? (circle one) Website Advertisement Church Friend

Other _____

Why does your child want to be here? (circle one) Friends Activity Faith

Other _____

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Authorization and Privacy:

All information collected by **The First United Methodist Church** will be used for the purposes of **Vacation Bible School**. We never sell, rent, lease or exchange your personal information with other organizations. Contact information will be added to **The First United Methodist Church** mailing lists to inform you of future programs within **The First United Methodist Church** unless you notify us in writing.

Photo release:

Individual and group photos will be taken of your child(ren) during Vacation Bible School for instructional use at Vacation Bible School and Church. Photos will not be used for publicity including internet and/or newspaper. If you do not want a photo taken of your child for instructional use during VBS you will need to inform us in writing.

Discipline policy:

Discipline policy from the church's safe sanctuary policy section III: "If a child is having a difficult time participating in the activities during VBS, the teacher will provide a "time-out" for the child away from other students in the program. The child may return to normal activities as soon as possible." If child still cannot return to normal activities, the director and/or assistant director will be notifying the parent/guardian to come and pick-up their child.

Safety policy:

I understand that this is an evening VBS and safety procedures require that regardless of age a parent/guardian must be able to pick-up their child(ren). Walking to and from the church without a parent, legal guardian or person designated on this form is strictly prohibited.

Medical release:

I recognize the risk involved in activities and will not hold **The First United Methodist Church** its staff or volunteers responsible for any personal injury that might occur to my child(ren) while participating in this program. I authorize a **First United Methodist Church** staff member or volunteer to seek and obtain such emergency or medical services for my child(ren) as deemed necessary at the time.

Release of children:

In the event that I cannot personally pick up my child(ren) from Vacation Bible School, then I authorize any of the following individuals to enter the building and pick up my child(ren) each evening:

First and Last Name: _____ Phone: _____

First and Last Name: _____ Phone: _____

I, the parent or legal guardian of the above named participant has read the above policy and procedures. I, the parent or legal guardian of the above named participant allow him/her/them to attend Crocodile Dock VBS at The First United Methodist Church.

PARENT/GUARDIAN SIGNATURE:

DATE:
