



Register me for **Galactic Starveyors!**

(여름성경학교 등록신청서)

Monday, June 25 ~ Friday, June 29, 2018 (5:00pm to 8:30pm)

Registration fee: **\$25** (before June 17), **\$30** (after June 17)

Child's name _____

Gender: Male Female Birthdate ____/____/____ Grade completed _____

Address _____ City _____ State _____ Zip _____

Parents/Guardian _____ Cell phone _____

Work phone _____ Email _____

Emergency contact _____

Relationship to child _____ Phone _____

Food allergies Y__ N__ List _____

Medical concerns Y__ N__ Explain _____

* VBS leaders have permission to photograph/film the minor(s) designated above in any manner or form for any lawful purpose associated with this VBS program.

Parent's signature _____ Date _____

First Korean Presbyterian Church of Philadelphia (FKPCP)
400 N. Bethlehem Pike, Ambler, PA 19002
(215) 646-9500 / (215) 646-9503 (fax)
www.fkpcp.org / www.facebook.com/FKPCP.em



VBS 2018 Waiver Form

Those staff and volunteer representatives of FKPCP will take every possible safety precaution and every possible attempt will be made to contact parents or emergency contacts immediately in the event of injury or emergency. In the event of an injury, your child will likely be taken to Abington Memorial Hospital.

AGREEMENT/WAIVER AND RELEASE (must be signed in order to participate in VBS programs):

In consideration for being permitted by FKPCP and its representatives to participate in the Vacation Bible School (VBS) program, I hereby waive, release and discharge any and all claims for damages for personal injury, death, or property damage which I may have or which may hereafter accrue to my child enrolled, as a result of participation in the activities of Vacation Bible School. It is understood that these activities involve an element of risk or accidents, and knowing those risks, I hereby assume those risks. It is further agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns.

Parental/Guardian Consent: (To be completed and signed by parent/guardian)

I hereby consent that my child enrolled at FKPCP for VBS hereby execute the above AGREEMENT/WAIVER AND RELEASE on their behalf. I hereby agree to indemnify and hold the persons and entities mentioned above free and harmless from any loss, liability, damage, cost or expense which may incur as a result of the death or any injury or property damage that said minor may sustain while participating in VBS activities.

SIGNATURE PARENT/GUARDIAN: _____

Printed Name: _____ Date: _____

This waiver is to be signed by all participating adults 18 years old and over, and by a parent/guardian for participants under age 18.



You're INVITED!

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