



Vacation Bible School at
Oak View Baptist Church!
1004 S. Story Road
972-790-3629
June 11 - June 15
9:00 a.m. to 12:00 p.m.

Join us June 11 – 15 for an exciting week of Fun! Your child will discover new opportunities for learning and meeting new friends! We will also have inflatables, games, snacks, prizes and our annual Picnic (a cost of \$1) on Friday.

Oak View's Bible School is for any child (*age 5 years by Sept. 1, 2011 through 6th grade completed*) who wants to learn some incredible Bible truths and have a great time doing it. You don't have to be a member of our church or Bible Fellowship to attend. Maybe you're new to this part of Irving. What better way is there to meet some of your neighbors? So why not make plans now for your child to attend? You can *pre-enroll* them for VBS by filling out this form and sending it to (or drop it by) our church office or they can enroll the *first day of Bible School*. You can also enroll on line at www.ovbc.net and click on the Children's link. Don't miss out on this great opportunity.

Need a ride to VBS . . . contact us at the Church office at 972-790-3629 and ask for Linda.

VBS Registration Form

Child 1: _____

Birthday: _____ Age _____

Gender: Male Female (circle one) Grade your child just finished : _____

Allergies, Medical, & Special Needs:

Child 2: _____

Birthday: _____ Age _____

Gender: Male Female (circle one) Grade your child just finished : _____

Allergies, Medical, & Special Needs:

Child 3: _____

Birthday: _____ Age _____

Gender: Male Female (circle one) Grade your child just finished : _____

Allergies, Medical, & Special Needs:

Parent/Guardian: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____

Cell Phone _____

Email: _____

Emergency Contact Name (1): _____

Emergency Contact Phone (1): _____

Emergency Contact Name (2): _____

Emergency Contact Phone (2): _____

Authorized Pickup #1: _____

Authorized Pickup #2: _____

Are you a member of this church? Yes No (circle one)

Do you attend Church? Yes No (circle one)

If so, where? _____

Guest of: _____

Emergency Medical Consent: In the unlikely event of an emergency and I cannot be reached, I hereby give permission to the VBS Nurse or Director to secure and administer treatment, including transportation and hospitalization for the children named above. I further understand I will be responsible for payment of all emergency medical expenses incurred by or on behalf of my child.

Photo Release: I hereby grant permission to Oak View Baptist Church to use my minor child's photographs on its Website or other official church printed publications without further consideration and I acknowledge the church's right to crop or treat photos at their discretion. I also understand that once my minor child's image is posted on the church's website the image can be downloaded by any computer user. Therefore, I agree to indemnify and hold harmless the church, its trustees, pastors, associate pastors, deacons, staff, members and/or designees from any claims because of using my child's photographs.

Signature of Parent or Guardian