

Office Use: \_\_\_\_\_ Reg. Fee (**Paid** Cash \_\_\_ Check # \_\_\_\_\_) \_\_\_\_\_ Med. Authorization \_\_\_\_\_ Consent



**Grow in Faith. Have Fun. Change the World.**

*First Congregational Church of Houston*  
*VACATION BIBLE SCHOOL 2010*  
*ADULT REGISTRATION*

July 31<sup>th</sup>, Aug. 7<sup>th</sup>, Aug. 14<sup>th</sup>, Aug. 21<sup>st</sup>, Aug. 28<sup>th</sup>  
9:00 a.m. – 12:00 p.m.

Participant's Name \_\_\_\_\_

Phone: Home, Work, or Cell \_\_\_\_\_

Address \_\_\_\_\_

City Zip Code

Contact E-mail (please include an e-mail address that is checked at least once per day) \_\_\_\_\_

Home Church: \_\_\_\_\_

Participating Family Members: \_\_\_\_\_

Food Allergies: \_\_\_\_\_

Other Allergies: \_\_\_\_\_

**Circle Your T-Shirt Size:**

Small	Medium	Large	X-Large	XX-Large
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*First Congregation Church of Houston*

10840 Beinhorn Road

Houston, TX 77024

713-468-5951



*Vacation Bible School 2010*

July 31<sup>th</sup>, Aug. 7<sup>th</sup>, Aug. 14<sup>th</sup>, Aug. 21<sup>st</sup>, Aug. 28<sup>th</sup>

9:00 a.m. – 12:00 p.m.

**TO: FIRST CONGREGATIONAL CHURCH VACATION BIBLE SCHOOL**

**Consent to Participate**

I, \_\_\_\_\_, hereby consent to my participation in any of the functions, activities, or field trips connected with the First Congregational Church Vacation Bible School program.

I realize that life has some attendant risks and I acknowledge this and agree that I will hold harmless, indemnify, and release from liability First Congregational Church, its agents and officers for any accident, injury, or illness suffered by me in connection with my participation in Vacation Bible School.

**Photography Release**

I, \_\_\_\_\_, hereby give permission for pictures of myself to be included on bulletin boards, on the website, and in presentations of First Congregational Church of Houston.

\_\_\_\_\_  
Participant's Signature