

Growing in God's Garden



Registration Form 2026

(One Per Child)

Child's name: _____

Child's age: _____

Date of birth: _____

Last school grade completed: _____

Name of parent(s): _____

Street address: _____

City: _____ State: _____ ZIP: _____

Home telephone: (_____) _____

Parent/caregiver's cellphone: (_____) _____

Home e-mail address: _____

List persons other than parent/guardian who child may be released to:

Yes _____ No _____ May child may walk home without adult supervision.

Allergies or other medical conditions: _____



In case of emergency, contact: _____

Phone: _____

Relationship to child: _____

- I/we, parent(s) or authorized guardian of the child named above give permission for his/her participation in First United Methodist Church of Fort Lupton Vacation Bible School and all related activities.
- I/we give permission to The First United Methodist Church of Fort Lupton to use any pictures taken of my child in newspapers, displays, on the church web page or any other publication used to promote or educate others about the church.
- I/we give my permission for the volunteers of the First United Methodist Church of Fort Lupton to transport my child by car, church van, bus or by foot during the VBS.
- In the event of serious illness or injury when neither parent can be reached, I give my permission for an ambulance to transport my child, if necessary, and for the staff of any chosen hospital to give necessary treatment to my child in the event of an accident or other emergency. I agree to accept financial responsibility for any medical transport or care

Parent's signature _____

Date: _____