



Come Join the Fun!

Vacation Bible School

July 15-19, 2019

9:00AM-Noon

4 yrs old through 5th grade

Registration Now Open

\$15.00 Per Child/\$35 Max per Family

At Mars and Beyond VBS, we will enjoy an interactive, energizing, Bible-based good time where we will explore where God's power can take us. We will become Voyagers and discover how to serve God and God's mission by going beyond with Faith, Boldness, Kindness, Thankfulness and Hope.

Be Prepared to Blast off on this epic Adventure with us! Come and meet new friends, do fun activities, sing great songs, make crafts, play games, eat snacks, and more!

Shepherd of the Hill Lutheran Church

925 E. 9th Street

Lockport, Illinois 60441

www.shepherdofthehill.com

(815) 838-0708



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Children:

Name: _____ Age: _____ Last Grade Completed: _____

Name: _____ Age: _____ Last Grade Completed: _____

Name: _____ Age: _____ Last Grade Completed: _____

Name: _____ Age: _____ Last Grade Completed: _____

Parents / Guardians: _____

Street address: _____

Telephone: (best for VBS times) _____

E-mail address: _____

Is anyone interested in helping with VBS?

Home church: _____

Will anyone other than yourself be bringing or taking the child(ren) from VBS:

Name: _____ Phone: _____ Relationship _____

Name: _____ Phone: _____ Relationship _____



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EMERGENCY Information

Allergies or other Medical conditions:

In case of emergency contact:

Phone: ()

Relationship to Child:

The undersigned gives permission to his or her child to participate in Vacation Bible School at Shepherd of the Hill Lutheran Church, Lockport IL and releases Shepherd of the Hill Lutheran Church, its officers, employees, and agents from any liability whatsoever for any injury or death to person or loss or damage to property sustained by the undersigned for any member of his family, in attendance, and the undersigned agrees to defend and indemnify Shepherd of the Hill Lutheran Church, its officers, employees, and agents from any liability or loss they might sustain by reason thereof. In the event I cannot be reached in an EMERGENCY, I hereby give permission to the physician selected by the director team of Vacation Bible School to hospitalize, secure proper treatment for, and order injection, anesthesia, or surgery for my child (ren) named in or on this registration.

Signed: _____

Date: _____

Print Name: _____

By signing this registration form Shepherd of the Hill Lutheran Church, Lockport, IL has my permission to use my child's photograph publicly in VBS materials. I understand the images may be used in print publications, online publications, presentations, websites, and social media. I also understand that no royalty, fee or other compensation shall become payable to me by reason of such use.

OFFICE USE ONLY:

Amount Paid _____

Voyager Group: _____

Family Volunteer(s) _____

Pick-up Code: _____