

SPRINGFIELD BAPTIST CHURCH
SUMMER FUN FEST / VBS REGISTRATION FORM 2017

I hereby authorize (my son/daughter) _____
to go to the following activity: Summer Fun Fest / VBS on July 31, Aug 2 & Aug 4
and hereby absolve The Springfield Baptist Church and agents thereof of any and all
responsibility for his/her safety while there. Should he/she need a doctor of
emergency treatment at any hospital, I authorize such treatment that may be deemed
necessary. My son/daughter will be responsible for his/her own personal
possessions.

NAME _____ AGE _____

ADDRESS _____

Home phone # _____

Emergency # where you may be reached _____

Allergies _____

Parent or Guardian Signature _____