

Vacation Bible School (VBS) 2014

Silicon Valley Christian Assembly (SVCA)

Theme: The Armor of God" (Ephesians 6:11-18)

Who may attend: students entering Kindergarten to 5th grade in Fall 2014

Date and time: August 4-8, 9:30AM-12:30PM (lunch included; check-in starts at 9AM; students must be picked up by 1PM)

Registration fee (including a VBS T-shirt): \$30 per student before 6/16; \$50 per student after 6/16; registration ends on 7/13 (please make check payable to: SVCA, and indicate "for VBS"). No partial registration fee. Registration fee is not refundable after 7/13.

How to register: mail the attached VBS REGISTRATION FORM, Ministry Activity Consent and Release Form, and paycheck to our church office (address is below), or drop them into the "VBS" box on the table outside the Children Center at church:

Silicon Valley Christian Assembly
Attn: VBS
3131 Bower Avenue
Santa Clara, CA 95054

The priority of the registration will be processed in the order received. The registration will be closed when the space is filled or the deadline is met, whichever is first. VBS will inform you with full refund if your child is not accepted to the program.

CODE OF CONDUCTS:

All children are expected to respect their teachers and staffs, and follow their instructions. Children are also expected to be courteous to one another. Violators of the code of conducts may be removed from their groups and/or activities. Parents may be called to pick up their child for persistent violations.

VBS REGISTRATION FORM

Student

NAME: _____ AGE: _____ Grade in Fall 2014: _____

NAME: _____ AGE: _____ Grade in Fall 2014: _____

NAME: _____ AGE: _____ Grade in Fall 2014: _____

CURRENT ADDRESS:

Mom's name: _____ Dad's name: _____

Mom's cell phone: _____ Dad's cell phone: _____

Home phone: _____ Contact Email: _____

Emergency contact person (person who may be contacted if parent cannot be reached in case of emergency):

Name: _____ Relationship: _____

Cell phone: _____ Home phone: _____ Work phone: _____

Student's insurance company: _____ ID # _____

Physician: _____ Phone: _____

Liability waiver:

the undersigned, in consideration of participation in VBS agrees to indemnify and hold the Silicon Valley Christian Assembly(SVCA, its pastors, elders, Elders, Deacons, and VBS volunteers staffs) harmless and release SVCA from any and all liability for any injury which may be suffered by the named individual registered in the VBS, arising out of or in any way connected with participation in this program. I have read the above application and agreement, and fully understand that I assume all risks for injuries received.

Parent Signature: _____ Date: _____

Any special needs or food allergy for your child:

For SVCA use only:

Check No : _____

Receiver : _____

Ministry Activity Consent and Release Form

I, the undersigned parent or guardian, hereby consent to my child, (name as follows),

_____ participating in the Silicon Valley Christian Assembly (SVCA) Vacation Bible School activities, including classroom, assemblies, craft, recreation, water fight, and snack, an event sponsored by SVCA on August 4-8, 2014.

If my child has medical conditions that may be relevant to a physician in the event of an emergency, I have listed them below. In the event an emergency occurs, I may be reached at the telephone numbers listed below. If I can't be reached, I hereby authorized the church administrator or church official to make emergency medical decisions for my child. If there are any activities I do not want my child to be involved in, I have listed them below.

I UNDERSTAND AND HEREBY AGREE TO ASSUME ALL OF THE RISKS WHICH MAY BE ENCOUNTERED ON SAID ACTIVITIES, INCLUDING ACTIVITIES PRELIMINARY AND SUBSEQUENT THERETO. I do hereby agree to hold Silicon Valley Christian Assembly and it's agents, staffs and employees, harmless from any and all liability, actions, causes of actions, claims, expenses, and damages on account of injury to my child or property which I now have or which may arise in the future in connection with the activity or participation in any other associated activities.

PHOTOGRAPHY: I understand that pictures and videos will be taken of children participating in various Vacation Bible School activities.

I expressly agree that this release, waiver and indemnity agreement is intended to be broad and inclusive as permitted by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. This release contains the entire agreement between the parties hereto and the terms of this release are contractual and not a mere recital.

I further state that I HAVE CAREFULLY READ THE FOREGOING RELEASE AND KNOW THE CONTENTS THEREOF AND I SIGN THIS RELEASE AS MY OWN FREE ACT. This is legally binding agreement that I have read and understand.

Parent or guardian signature: _____

Date: _____

Telephone numbers where I may be reached in an emergency:

_____, _____, _____

Medical condition to be aware of: _____

I do not wish my child to participate in the following: _____