

Rocky Railway: Jesus' Power Pulls Us Through

REGISTRATION & RELEASE FORM

\$25.00 per child (one registration form per child)

Name: _____

Street Address: _____

City & Zip Code: _____

Home Telephone: _____

Cell Telephone: _____

Grade Entering in September 2021: _____

Parent e-mail: _____

In case of emergency contact: _____

Mother: _____

Father: _____

Other: _____

Preferred Hospital: _____

Allergies or other medical conditions: _____

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In consideration of the child being allowed to participate in vacation bible school, on behalf of the child, my spouse, and myself, I hereby assume all risks in connection with vacation bible school and I further release the Bishop of Cleveland, the Roman Catholic Diocese of Cleveland, the Pastoral staff, employees and volunteers of St. John Vianney Parish, Mentor, Ohio and St. Mary of the Assumption, Mentor, Ohio thereof from all claims, judgments, liability for any injury or damage that the child or his/her estate, myself or my spouse ever had, now or may have due to the child's participation in the foreseen or unforeseen. I further authorize St. John Vianney Vacation Bible School staff to seek medical care for my child in the case that they cannot reach me or my representative.

Would you like to purchase a CD? Yes___ No___ \$6.99 each

Signature:_____ Date:_____

Office use only: Paid \$ _____ cash/check_____ Date_____

(Please complete the second page for each child being registered)

Internet/Photo Release Form

As you may know, St. John Vianney Parish has a website titled **www.sjvmentor.org**. The website, or links from this website, will include articles and photos involving children and adults at various church functions. Every effort will be made to protect the individual identity of all children involved in the pictures. No telephone numbers or addresses will be placed on the website. There may be times that some children's first names are used. For these reasons we are asking for your permission to use yours/your child's photograph's on our website.

_____ **I DO**

_____ **I DO NOT**

grant permission to St. John Vianney Parish to use my child's photograph on its web site.

Parent's Name

Parent's Signature

Date

Child's/Children's Name
