



Registration Form

235 Dotson Street – Mountain City, GA – 706-746-5823

Please notice the deadline for the special registration rate is June 19th

Child's name: _____

Parent/Guardian name(s): _____

Parent/Guardian primary phone: _____ Secondary phone: _____

Mailing address: _____

Email address: _____

Child's birth date: _____ Gender: _____ Child's T-shirt size: _____

Church your family attends (if any): _____

In case of emergency (when the parent/guardian cannot be reached) the church should contact:

Name: _____

Telephone: _____

Relationship to child: _____

Please list any allergies, medical, or other special conditions that we should be aware of:

The person(s) responsible for picking up this child at the end of the camp day is:

Name: _____

Home Phone: _____ Work: _____ Cell: _____

Please enclose a registration fee of \$60 (\$10 less for each additional sibling) through June 19th. After June 19th, the camp fee is \$70. Cost covers soccer training, daily snacks and lunch, and includes a camper soccer ball, T-shirt, and camp bracelet. Return the fee along with this form and the medical release and image release form (attached) to the church address by June 19, 2023 to ensure this special rate. The last day to register is June 29, 2023.

Signature of Parent/Guardian _____ Date: _____

I am requesting a scholarship for my child:

FULL _____ PARTIAL _____ (And you can pay): _____

Signed: _____

Approved by: _____ Date: _____



PO Box 631 • Mountain City, GA 30562 • (706)-746-5823 • www.MyGraceBibleChurch.org

IMAGE RELEASE CONSENT FORM

During various events at GBC, we take photographs and videos of children in action as they participate in events, outings, and other church sponsored events. We would like you to indicate below what uses of images of your child you are willing to consent to. This is completely up to you. We will only use the photographs in ways that you agree to. In any uses of these images, names and other personal information with **NOT** be identified unless first discussed with parents.

- Images of my child(ren) may be used as part of pamphlets, brochures, and other informational materials.
- Images of my child(ren) may be used for newspaper publications for announcements of events or other activities.
- Images of my child(ren) may be used at meetings, lectures, and workshops designed to educate leaders and congregations about GBC's Children's Ministry
- Images of my child(ren) may be used on the Grace Bible Church website and Facebook page.
- Please **do not** use ANY images of my child(ren) in ANY way.
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I have read the above description and give my consent for the use of the images as indicated above.

Child(ren)'s name(s): (please print) _____

Parent/Guardian name: (please print) _____

Parent/Guardian Signature _____ Date: _____

Activity Permission and Medical Release Form 2023

Sponsor: *Grace Bible Church*

Name of Minor: _____

Age: _____

Address: _____

Name of Parent or Guardian: _____

Email: _____

Address: _____

Home phone: _____ Cell phone: _____ Emergency

contacts other than the parents or guardian:

1. Name _____ Work # _____ Home # _____

2. Name _____ Work# _____ Home# _____

Permission and Release: I give permission for my child to participate in Grace Bible Church Activities. In the event he/she is injured, I waive and release all rights to any claim for damages against the sponsor or its representatives. I further agree that any claim or dispute arising from or related to this agreement shall be settled by mediation and, if necessary, legally binding arbitration.

Medical Release: In the event that my child suffers sudden illness, accident, or injury and neither parents nor guardians can be contacted, I give permission for any emergency treatment that is deemed necessary by a licensed physician.

Family physician: _____ Work phone _____

Home _____

Medical insurance company _____

Pertinent medical information (diabetes, allergies, etc.)

Signature _____

Date _____