

Register me for Expedition NORWAY!

2026 Vacation Bible School Registration and Waiver Release

Date: June 8-12 Time: 6PM – 8PM

**Location: Greensburg Church of the Brethren,
554 Stanton St., Gbg PA 15601**

*Please have children arrive by 5:45 PM for Check-in/Registration on the 8th or their first day

Child's Name (Last, First)

Birthdate

Last Grade Completed

Parent/Guardian Name(s) _____

Address _____

Home Phone _____ Cell Phone _____ Work Phone _____

Parent email address(es) _____

Emergency Contacts (if parent/guardian cannot be reached):

Name _____ Phone _____

Name _____ Phone _____

People authorized to pick up my child(ren) _____

Allergies (food, bee stings, etc.) _____

Medical Conditions (e.g. asthma) _____

Medications _____

Activity restrictions _____

PHOTO/VIDEO PERMISSION: I DO / DO NOT (circle one)

give my consent to Greensburg Church of the Brethren to use photo or video images taken of my child (ren) in church brochures, advertisements for the church, on the website, in social media, and in other church publications as they see fit. I agree to hold harmless Greensburg Church of the Brethren from any liability which may result from the use of said picture(s). This form will apply throughout my child(ren)'s tenure at Greensburg Church of the Brethren's Vacation Bible School.

****None of the photos will be for personal use.****

I hereby give permission for my child(ren) to participate in Vacation Bible School at Greensburg Church of the Brethren on June 8-12, 6PM-8PM

Parent/Guardian Signature _____ Date _____

OVER

All information will remain confidential to Vacation Bible School staff.

**Please return all completed Registration/Permission/Waiver forms to:
Greensburg Church of the Brethren**

LIABILITY RELEASE: In consideration of Greensburg Church of the Brethren allowing the above child(ren) to participate in Vacation Bible School activities, I, the undersigned, do hereby release, forever discharge, and agree to hold harmless Greensburg Church of the Brethren, its directors, employees, volunteers, and agents (collectively herein the “Church”) from any and all liability, claims or demands for accidental personal injury, sickness or death, as well as property damage and expenses, of any nature whatsoever which may be incurred by the undersigned and the above child(ren) while involved in Vacation Bible School. Furthermore, on behalf of my minor child(ren), I hereby assume all risk of accidental personal injury, sickness, death, damage, and expense as a result of participation in activities involved therein. As well as releasing the child(ren), if necessary, for transportation to and from the Vacation Bible School location, I, the undersigned, do hereby release, forever discharge, and agree to hold harmless Greensburg Church of the Brethren, its directors, employees, volunteers, and agents from any and all liability, claims or demands for accidental personal injury in the process of transportation.

MEDICAL TREATMENT PERMISSION: I authorize an adult, in whose care the minor has been entrusted, to consent to any emergency X-ray examination, anesthetic, medical, surgical, or dental diagnosis or treatment and hospital care, to be rendered to the minor under the general or special supervision and on the advice of any physician or dentist licensed on the medical staff of a licensed hospital or emergency care facility. The undersigned shall be liable and agree(s) to pay all costs and expenses incurred in connection with such medical and dental services rendered to the aforementioned child(ren) pursuant to this authorization.

Name(s) of Sibling(s) also attending (Last, First)