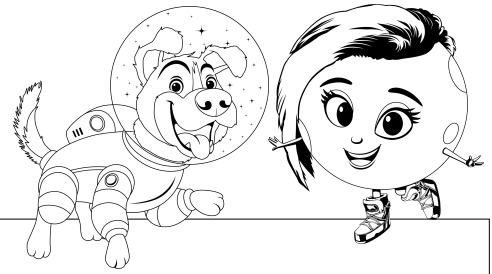


VBS

VACATION BIBLE SCHOOL

ST. BONIFACE PARISH REGISTRATION FORM (GRADES 1 - 8)

**JUNE 19 - 23, 2023
9:00AM - 12:30PM**



PARENT INFORMATION:

Mother's:

FIRST MIDDLE LAST

Mother's Cell: _____

Father's:

FIRST MIDDLE LAST

Father Cell: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home Parish: _____

ALTERNATE/EMERGENCY PICK-UP INFORMATION

Name: _____

Name: _____

Relationship to Child: _____

Relationship to Child: _____

Phone: _____

Phone: _____

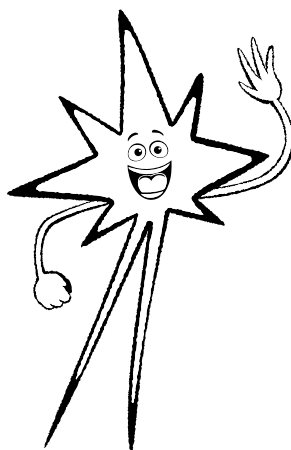
CHILD'S NAME	AGE	INCOMING GRADE	GENDER	DOB (mm/dd/yyyy)	YOUTH SIZED T-SHIRT	ADULT SIZED T-SHIRT
1)						XS S M L XL
Allergies/Health/Diet/Special Needs of this Child:						
2)						XS S M L XL
Allergies/Health/Diet/Special Needs of this Child:						
3)			M F			XS S M L XL
Allergies/Health/Diet/Special Needs of this Child:						

WOULD YOU LIKE TO VOLUNTEER AT VBS?

YES NO

WOULD YOU LIKE TO SPONSOR A CHILD TO ATTEND VBS?

YES NO



FEE: \$65 PER CHILD (\$80 AFTER JUNE 1)

INCLUDES:

- SHIRT
- SNACKS
- LUNCH
- CRAFTS
- OTHER GIFTS

FOR OFFICE USE ONLY:

Make checks payable to:

SAINT BONIFACE PARISH

\$65/80 per CAMPER (x _____) = _____

\$15... per LEADER (x _____) = _____

Amount Paid: _____

Cash CK # _____

Receipt #: _____

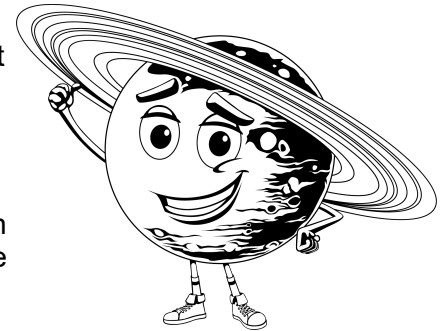
Received By: _____ Date: _____

**ASSUMPTION OF THE RISK AND WAIVER OF LIABILITY
RELATING TO CORONAVIRUS/COVID-19**

COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments, along with federal & state health agencies, recommend wearing a face mask, while practicing physical distancing, and have prohibited the congregation of groups of people in many locations.

We at Saint Boniface Parish (SBP) have put in place protective measures, following guidelines from the CDC & the Diocese, to reduce the spread of COVID-19; however, we cannot guarantee that you or your child(ren) will not become exposed to COVID-19. Further, attending activities on the campuses of SBP could increase your risk and your child(ren)'s risk of contracting COVID-19.

By signing and initialing either directly below, or on the SBP Registration Form for either: VBS, Grades 1 - 8, High School, Confirmation, or RCIA/Adult Confirmation, I acknowledge the contagious nature of COVID-19 and on behalf of myself, my child(ren), and/or members of my family voluntarily assume the risk that my child(ren) and I, and any member of my family, may be exposed to or infected by COVID-19 by attending activities on SBP Grounds. By signing, we understand such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 while on SBP campuses may result from the actions, omissions, or negligence of myself and others, including, but not limited to: SBP employees, agents and representatives, volunteers, program participants and their families and/or any other individual who may be present on parish property or in attendance at any parish activity.



I voluntarily agree to assume, on behalf of myself, my child(ren), and/or members of my family all risks and accept sole responsibility for any injury to my child(ren), myself and any member of my family, (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I, my child(ren) and/or members of my family may experience or incur in connection with my child(ren)'s attendance in activities or participation in æSBP programming ("Claims").

On my behalf, and on behalf of my children and/or members of my family, I will advance no claim and I hereby release, covenant not to sue, discharge, defend, indemnify and hold harmless SBP, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree this release includes any Claims based on the actions, omissions, or negligence of SBP, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any SBP activity.

AUTHORIZE FOR PHOTOGRAPHS & RECORDINGS

I hereby authorize the participation and inclusion of my child (ren) in the recording of said event through the use of photographs, motion pictures, videotapes, recording, or other memorializing. I further authorize the publication and duplication of any recordings that include image of my child (ren). I understand that any such recording are the property of Saint Boniface Parish and hereby waive any rights to compensation or any other rights regarding the recording of the event.

Name (Printed)

Signature

Date

For more info contact: Nohemi Gutierrez (714) 678-0028 | 120 N Janss St, Anaheim, CA 92805