



FERGUS FALLS ELCA  
BUTTERFLIES VBS



Registration Form

CHILD(REN) NAME(S) & AGES \_\_\_\_\_

PARENT(S)/GUARDIAN(S) NAME(S) \_\_\_\_\_

PHONE (\_\_\_\_) \_\_\_\_\_

AFFILLATED CHURCH \_\_\_\_\_

\_\_\_\_\_ I would like to make a monetary donation to the Vacation Bible School program. (Please bring in with registration)  
Thank you for helping to make Vacation Bible School 2023 happen for all our children! We greatly appreciate your contribution!

**THIS FORM MUST BE SIGNED FOR VBS ATTENDANCE.**

My child will stay home from VBS if he/she has any of the following symptoms:

- A fever greater than 100 degrees and will stay home until he/she has been fever free for 24 hours without medication.
- Diarrhea
- Vomiting more than two times in a 24-hour period
- Mouth sores with drooling
- Unidentified rash that cannot be covered or is distracting to my student
- Drainage from the eye
- Specific illnesses that require a defined period of absence from Day Camp

Ex. Strep Throat, Covid-19 (please follow the CDC guidelines for isolation : <https://www.cdc.gov/coronavirus/2019-ncov/your-health/isolation.html>), etc.

**Parent/Guardian Permission to Participate:** My child has permission to participate in all aspects of the Butterflies VBS Program and I agree that the church, church personnel, and its volunteers will not be held responsible for accidents arising from participation. I also give permission for any pictures or video taken of my child and the adult attending can be used for promotional purposes.

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

*Forms can be turned in at any of the following participating churches: Augustana, Bethlehem, First, Hope, and Zion Lutheran Churches.*