

VACATION BIBLE SCHOOL 2008: Permission for Care

As the parent/legal guardian of _____, permission is hereby given for my child to attend Vacation Bible School from **Aug. 4 – 9, 2008** at **Queen of Apostles' School in Alexandria beginning at 8:45am and ending with pick-up at Noon**. I understand and acknowledge that my child will be participating in activities that are low impact; however, accidents may still happen. These activities include field day activities, scavenger hunts, and relay races. I agree to indemnify the Parish, Volunteers, and the Diocese of Arlington for any costs or expenses arising out of my child's participation in the activities including the cost of any medical care given to my child.

I further give my consent to that in my absence the above-named minor may be admitted to any hospital or medical facility for diagnosis and treatment. I request and authorize physicians, dentists, and staff, duly licensed as Doctors of Medicine or Doctors of Dentistry or other such licensed technicians or nurses, to perform any diagnostic procedures, treatment procedures, operative procedures and x-ray treatment of the above minor. I have not been given a guarantee as to the results of examination or treatment. I authorize the hospital or medical facility to dispose of any specimen or tissue taken from the above-named minor.

Date of Birth _____

Date of last Tetanus Booster _____

Known allergies including any allergies to medicine (Continue on another sheet of paper if needed):

Any other medical problems that should be noted (Continue on another sheet of paper if needed):

Name of Parent/ Legal Guardian: _____

Address: _____

City/State/Zip: _____

Phone: Home _____ **Work** _____ **Mobile** _____

Person to notify if parent/guardian is unavailable: _____

Phone Home _____ **Work** _____ **Mobile** _____

Family Physician Phone: _____

Insurance Carrier & Policy Number: _____

Signature of Parent : _____ **Date** _____

K4J needs *your* help in order to be a success! Please consider contributing in one of the following ways:

___ Making a **tax-deductible contribution** to K4J VBS (make check to **Queen of Apostles Church**), amount enclosed: _____

___ Station Leader (check one): ___ Crafts; ___ Games; ___ Music/Prayer; ___ Saints & Missionaries; ___ Snack

___ Station Assistant (check one): ___ Crafts; ___ Games; ___ Music/Prayer; ___ Saints & Missionaries; ___ Snack

___ Coordinating youth helpers (Captains)

___ Helping with craft/material preparation

___ K4J Team Leader (age 4-5 or Gr. 1-4 children)

___ Helping with set-up or clean-up

___ Babysitting (for volunteers' children)

___ Other (please circle): decorations, photography, technical assistance

___ Coordinating Saturday's party/picnic

___ Helping from home

___ Where the need is greatest