



*Please note:  
If your child attends TCC,  
they will be registering  
through their class! No  
need to fill this out ☺*

## Trinity Church's ACTIVATEKIDZ VBS 2020 REGISTRATION FORM!

**August 3<sup>rd</sup>-7<sup>th</sup> 9:00-11:30am**

**For kids ages 3yr. old thru completed 5<sup>th</sup> Grade!**

**\*Register your child by completing this form and returning it to the church!**

**\*\*Please, one form per child! Any questions, email Emily at [Trinitycymin@gmail.com](mailto:Trinitycymin@gmail.com)!**

Child's Name: \_\_\_\_\_ Circle: Male or Female

Child's Age: \_\_\_\_\_ T-shirt size: \_\_\_\_\_ Grade completed June '20: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Primary Cell #: \_\_\_\_\_

Circle: Mom Dad Guardian Name: \_\_\_\_\_

Best Email: \_\_\_\_\_ Home Church: \_\_\_\_\_

Allergies or other medical conditions we need to be aware of: \_\_\_\_\_

In case of an Emergency and parent cannot be reached, Contact: \_\_\_\_\_

Relationship to child: \_\_\_\_\_ Who will be picking up child: \_\_\_\_\_

I give permission for my child to attend and participate in all events and activities as a part of Trinity Church's Activate! Children's Ministry VBS program. I also authorize VBS staff to obtain and give treatment for my child, while attempting to contact me, for such injury or illness that may occur in my absence and hold them harmless in the exercise of this authority. Unless otherwise notified, my signature also gives permission for still or video pictures of my child to be used for church promotional purposes.

Signature of parent or Guardian \_\_\_\_\_ Date: \_\_\_\_\_

**Please return Registration form(s) to church by Wednesday, July 29<sup>th</sup>, 2020.**

**Drop-off forms or mail to:**



Trinity Church  
C/o Emily Layser  
84 Lombard Ave.  
Danville PA. 17821

\_\_\_\_ YES! I'm excited and would love to help out with VBS this year! Please contact me at: \_\_\_\_\_

**PLEASE SEE ATTACHED FORM REGARDING OUR NEW 2020 COVID-19 POLICY AND GUIDELINES.**

**PLEASE SIGN & RETURN BOTH FORMS IN ORDER FOR YOUR CHILD TO ATTEND. Thanks!**

Please carefully read the following information in regards to VBS 2020. Please note that ALL VBS activities will be held OUTSIDE this year, so please dress your child appropriately. (We will have large tents set-up for protection from sun and in case of rain. As a last resort, we will also have access to the large Fellowship Hall and a few classrooms should we need more cover.) Our goal is to keep the groups smaller and more spaced out.

**When attending VBS, my child will be expected to obey the following guidelines:**

- Wear a mask (masks may be lowered during any water play, excessive physical activity or during snack time)
- Wash hands and have temperature taken upon arrival
- Maintain social distance (6 ft. apart, to the best of their ability)
- Wash hands and use provided hand sanitizer frequently throughout the morning
- Not attend if feeling sick (cough or fever of 100.4 or higher, diarrhea/vomiting), having any symptoms of being sick, or if having had exposure to someone else who is sick or possibly sick with the virus.

For your safety, we will be following the same guidelines as our child care facility, which have been put in place by the Office of Early Child Development and the Department of Health.

**You will notice our volunteers doing the following:**

- Wearing a mask
- Aiding in keeping kids distanced
- Encouraging handwashing/sanitization
- Sanitizing any and all limited shared objects in between usage (craft supplies, sports items, etc.)

Please contact Emily Layser if you have ANY questions or concerns at [trinitycymmin@gmail.com](mailto:trinitycymmin@gmail.com). As you know, this situation in our community and nation can change weekly. Please be prepared for changes at ANY time, either allowing us to be less restrictive or causing us to be more restrictive. Thank you SO MUCH for understanding!

I hereby acknowledge the contagious nature of the COVID-19 virus and voluntarily assume the risk that my child may be exposed or infected by participating in this VBS program. I hereby release liability of Trinity Church and all of its staff and volunteers from any and all claims, demands, actions, costs, fees liabilities, and expenses arising out of any injuries or sickness that my child may incur.

I also agree to continue to abide by the requirements imposed by the Center for Disease Control, the Commonwealth of PA and Trinity Church to help to reduce the spread of the virus while my child is participating in this VBS program to keep everyone safe and healthy.

By signing this document, I am acknowledging that I have read and understand these new guidelines for Trinity United Methodist Church's 2020 VBS Program.

**Name of Parent/Guardian (please print):** \_\_\_\_\_

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

**THANK YOU!**