

IMPORTANT INFORMATION
NEW SIGN IN/SIGN OUT SYSTEM
VBS 2017



Dear Parents:

At Resurrection Lutheran Church (RLC), nothing is more important to us than the safety and security of your children. That's why we've chosen KidCheck as our children's check-in solution for Vacation Bible School to bring you the best check-in experience and to allow us to partner with you to keep your children safe.

We are live with KidCheck now. **It is important that you create your free account**, this is how **ALL** participants and staff will be signed in/out daily. Please do so by going to go.kidcheck.com, selecting "Create Your KidCheck Account," and following the on-screen prompts. Alternatively, you can download the KidCheck Mobile Check-In app to create, manage, and update your account right on your phone. When you arrive at RLC you'll be able to submit your check-in and print labels.

You can create your account from the comfort of home; it's simple and will only take a few minutes. Please create your account during the registration period. **We must have everyone's account created no later than May 15th** to help us have a smooth transition and help your first check-in go more quickly so you can get on your way.

Once you've created your account, simply use your 10 digit phone number to check-in with us or anywhere you see the KidCheck logo.

Thank you for your participation.

Brenda O'Connor
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VBS PARTICIPANT - Registration Form 2017



RESURRECTION LUTHERAN CHURCH
 Monday June 5th - Friday June 9th - 9:00am - 12:00pm
 Closing Program Friday June 9th at 6:00pm
 \$40/child or \$120/max per immediate family

For Director's use only:
 If turned in after May 15th please highlight late & enter date received
 LATE:

PLEASE PRINT THE FOLLOWING INFORMATION

Child	Child's First and Last Name If children have different last names, please fill out different forms for each name.	Age	DOB (dd/mm/yy)	Girl/Boy G or B	Grade/class 2016-2017 School year	School Attended
1						
2						
3						
4						

(Please do not list crew leaders or other staff on this form. Please complete a Staff Registration Form)

Street Address: _____

City: _____ State: _____ Zip Code: _____

Email of Parent/Guardian: _____

Emergency Contacts: (Please list in the order that you prefer we call)

Name	Relationship to child	Cell #	Home/work #
	Parent/Gardian		

Allergies or other medical conditions- For allergies, please be specific. For children with nut allergies, may they eat snacks that were made at the same facility where nuts are packaged? Will you be providing a snack for your child?

Notes for the Director: Any other information we should be aware of?

Permission to use photograph

Resurrection Lutheran Church – Vacation Bible School 2017

I grant to Resurrection Lutheran Church the right to take photographs of me and my family in connection with Vacation Bible School. I authorize Resurrection Lutheran Church its assigns and transferees to copyright, use and publish the same in print and or electronically. I agree that Resurrection Lutheran Church may use such photos of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and web content.

I have read and understand the above and give permission for myself and the children listed above:

Date: _____ Signature Parent/Guardian _____

Parent/Guardian Printed Name: _____

Please write each child's first name in the correct box according to size.

Please note that if you sign up after the May 15th registration deadline, we will be unable to guarantee the size shirt that you have requested. We have to place the order in advance so that we get them in time for the program.

Child	Youth xs (2-4)	Youth sm (6-8)	Youth med (10-12)	youth lg (14-16)	youth xl (18-20)	Adult sm	Adult med	Adult lg
1								
2								
3								
4								

Name of one or two friend(s) your child might like to be in a group with. Please include friend's first and last name.

Your Child(ren's) names	1 st Friend Request	2 nd Friend Request

We will do our best to place your child with their friends, but it is NOT a guarantee, thank you for your cooperation in this matter.

CHURCH USE ONLY

Preferred payment method is check or credit card, cash is acceptable.

Paid By: Cash _____ Check # _____ Credit Card _____ Amount: \$ _____

Date received: _____ Date Music CD was given: _____