

LODI ENGLISH OAKS VACATION BIBLE SCHOOL

June 10-14, 2024, 9 am – 12 pm

Child's Name			Age				
Date of Birth	Gender: M	F	Grade Entering				
Street Address							
City	State		ZIP				
Parent/Guardian first name			Last Name				
Relationship							
Contact phone 1	Contact phone 2						
E-mail address							
Emergency Contact:							
Name	Contact phone						
Relationship							
Allergies or other medical conditions:							
Home Church							
How did you hear about us?							
Name of special friend(s) your child mig friends together in the same crew, but w							

******Turn page for Media Release******



Vacation Bible School Media Release

This is to certify that I grant permission for my child to participate and appear in video or audio recordings, films, photographs, written articles, or on websites and social media sites. This consent includes the use and editing of my child's image, voice and name in media projects by the Lodi English Oaks Adventist Church to print, broadcast on internet media outlets, such as newspapers, radio and television stations and news websites. I understand that all rights, title and interest in the photography for said media outlets belong to the Lodi English Oaks Adventist Church and that I will receive no financial compensation for the use of these pictures and/or videotape. In consideration of the opportunity for my child to participate, I release the Northern California Conference of Seventh-day Adventist, DBA the Lodi English Oaks Adventist Church, including its employees and volunteers, from all claims resulting from the use and editing of my child's image, voice or name, and the use, sale, editing and release to media outlets.

Date:			

Child's Name:______

Parent of legal guardian signature is required if the participant is under 18 years of age.

Parent or legal guardian name:_____

Parent or legal guardian signature: