

**The Episcopal Churches of Ascension and St. Mary's
2017 Vacation Bible School Registration
(located at Church of the Ascension, 1 Kingsley Ave)**

Camper's Name _____
(1 child per form, please)

Camper's Age _____ Birth Date _____

School attending _____ Last Grade Completed _____

Known allergies, special needs or concerns _____

Parent Name(s) _____

Address _____

Cell Phone _____ Home Phone _____

Email **(Required)** _____

Church Affiliation _____

Emergency Contact Person _____ Phone _____

Who will pick up your child? _____ Phone _____

Photo Release: I give permission for photographs and/or videos of the person listed above as camper's name to be used in print, on the internet and all other forms of media. I also hereby release Church of the Ascension/St. Mary's Episcopal Church and its agents, employees, volunteers from all claims, demands and liabilities whatsoever in connection with the above.

Parent/Guardian Name (Print) _____ Date: _____

Parent/Guardian Signature _____

Your signature below will give us permission to take your child off church property to the park across the street for recreation.

Parent/Guardian Signature _____

E-mail or mail completed form to ONE of the email or regular addresses below

Liz Orlando admin@ascensionsi.org

**Church of the Ascension Attn: VBS
1 Kingsley Avenue, Staten Island, NY 10314**

OR

OR

Cathy Carlson
administrator@stmarycastleton.org

**St. Mary's Episcopal Church Attn: VBS
347 Davis Ave, Staten Island, NY 10310**