



# Baobab Blast

## St. Aidan's 2010

Sunday, August 22 -  
Thursday, August 26, 2010  
5:30 - 8:00 PM,  
includes dinner each night!

### Vacation Bible School 2010 Registration Form

Student's name:

Age:

Last grade completed:

Parent's or Legal Guardian's name:

Home address:

Home phone:

Work phone:

Cell phone:

Emergency contact in case parent cannot be reached:

Name:

Telephone:

Does this student have any allergies or medical concerns?

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### Medical Insurance Information

Company:

Policy no.:

As the parent or legal guardian of \_\_\_\_\_, do you hereby grant to the adult supervisors and leaders of St. Aidan's Episcopal Church to make medical decisions with respect to said minor child in the event of an accident or injury when parental consent shall be unavailable or when circumstances shall require immediate medical decision, and to administer medication when required?

I, \_\_\_\_\_ hereby consent, dated this \_\_\_\_ day of \_\_\_\_\_, 2010.

Please name all persons authorized to pick-up this student from VBS each evening (*Student will not be allowed to leave with anyone not on this list.*):

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St. Aidan's Episcopal Church  
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