

ST. MATTHEW LUTHERAN CHURCH
1505 Dover St, Worthington, MN
2026 VACATION BIBLE SCHOOL REGISTRATION FORM

Student's Full Name _____

School Grade Completed _____ Student's Birth Date _____ Age _____

Parent/Guardian Name(s) _____

Family Address _____

City _____ State _____ Zip Code _____

Parent/Guardian Cell Phone Number(s) _____

Parent/Guardian Email Address _____

List any medical conditions/concerns or allergies of the student: _____

Where can parent/guardian be reached while the student is in our VBS (include phone number):

Emergency Contact if parent/guardian cannot be reached (include phone number): _____

I hereby enroll and give permission for my child to participate in the activities of St. Matthew Lutheran Church's VBS program.

(Parent/Guardian Signature)

(Date)

Image Release Permission:

I hereby grant St. Matthew Lutheran Church permission and consent to use the student's likeness in photographs, videos, or electronic images in any and all of its publications, including website entries, Facebook posts, without payment or any other consideration. I understand and agree that these materials will become the property of the organization and will not be returned. I hereby irrevocably authorize the organization to edit, alter, copy, exhibit, publish or distribute these images for purposes of publicizing the organization's programs or for any other lawful purpose. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein the likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the image(s). I hereby hold harmless and release and forever discharge the organization from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

Parent/Guardian Signature _____ Date _____

On Friday, June 19, 2026 our VBS program will be held from 9am-12pm at Pioneer Village in Worthington, MN. Please drop-off and pick-up your child at this site on Friday.

Parent/Guardian Signature _____ Date _____