



**Saint Margaret Mary Parish**  
**V.B.S. Registration/health form**  
**Aug. 7-11; 9:30-2:00 participants; 9:00-2:30 volunteers**

Participant name: \_\_\_\_\_ Age \_\_\_\_\_ Grade as of 9/17 \_\_\_\_\_

Miners (PreK- Gr. 5) \_\_\_\_\_ Crew Chief(High School) \_\_\_\_\_ Timberer(Middle School) \_\_\_\_\_

Participant address: \_\_\_\_\_

Parent/guardian (day) phone: \_\_\_\_\_ Parent/guardian email: \_\_\_\_\_

Participant allergies, chronic illness, or other conditions: *(List all as we will be serving a snack, lunch & dessert daily.)*

Health information/issues/restrictions of which we should be aware: \_\_\_\_\_

Please note ALL medications your participant(s) is /are currently taking *(including frequency & dosage)*

Family Health Insurance Co. \_\_\_\_\_ Policy # \_\_\_\_\_

Family Physician \_\_\_\_\_ Phone# \_\_\_\_\_

Person to contact in case of an emergency: Name: \_\_\_\_\_

Relationship to Crew Chief/Timberer/Miner: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Parent/Guardian Release: In signing this form, I hereby certify that the above information is correct. I give permission for the release of medical records to an attending physician in case of injury or illness.

In case of medical emergency, I understand that every effort will be made to contact the parent(s) or guardian of my child. In the event I cannot be reached, I hereby give permission to the physician attending my child to hospitalize, secure proper and necessary treatment for my son/daughter as named herein.

I agree that no liability is assumed by the Archdiocese of Boston, St. Margaret Mary Parish or St. Margaret Mary Rel. Ed. & Youth Ministry Program for claims that may arise out of this activity.

I agree that any photo or video of my child may be taken during Group's Cave Quest VBS and posted in the buildings of St. Margaret Mary Parish, Westwood and on the Saint Margaret Mary Parish website & facebook for the sole purpose of promoting God, our faith and this parish activity.

Parent(s)/Guardian(s) name(s): \_\_\_\_\_

Parent(s)/guardian(s) signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parish: \_\_\_\_\_ Town: \_\_\_\_\_

Total number of sibling participants attending: \_\_\_\_\_

Please return form with fee. (\$100 per Miner; \$25 per Crew Chief/Timberer) to  
 St. Margaret Mary Parish 845 High Street Westwood, MA 02090

Checks made payable to: St. Margaret Mary Parish (Please note on check: Cave Quest VBS)

Deadline for registration is July 31, 2017. Financial Aid is available. All requests confidential.

Don't let \$\$ keep your child(ren) from having a blast discovering the precious treasures of our faith!

**\*\* All crew chiefs and timberers and "God Squad Homerunners" must attend one training session in full. Failure to attend a training session will result in the student NOT participating in Cave Quest VBS. Sessions approximately 1 hr.15 minutes. Training sessions will take place at St. Margaret Mary Parish Offices:**

Sun., July 30 @ 6 pm \_\_\_\_\_ Mon., July 31 @ 6 pm \_\_\_\_\_ Sun., August 6 @ 6 pm \_\_\_\_\_