



Come to 5-Day Club

Games,
Bible and
Missionary Stories,
Refreshments, singing, and fun!

Dates: August 3—7, 2020

Time: 10:00—12:00 Noon

Where: Shelby Alliance Church
(105 E. Smiley Ave., Shelby, OH 44875)

Host: Pastor Mike Stinson (419-347-2160) Please complete this mandatory registration form and mail to the above address by July 27.

Teachers: Dale Baer, Patty Arvidson, Kelsey Vore and others.

Theme: "One Way"

Free for kids age 4 -12

Please bring this permission slip the first time you attend.

I give permission for _____ () to attend 5-Day Club*
(Child's Name) (Age)

Address: _____
(Street Town Zip)

Medical needs to be aware of _____

Telephone: Home _____ During Club Time _____

School _____ Church _____

Signature required on back



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Liability Waiver

I acknowledge that participation in the activity described on the reverse side of page involves risk to the participant (and to the participant's parents or guardians, if the participant is a minor), and may result in various types of injury including, but not limited to, the following: sickness, exposure to infectious/communicable **disease, bodily injury, death, emotional injury, personal injury, property damage, and financial damage.**

In consideration for the opportunity to participate in the activity described on reverse side of page, the participant (or parent/guardian if the participant is a minor) acknowledges and accepts the risks of **injury associated with participation in and transportation to and from the activity.**

The participant (or parent/guardian) accepts personal financial responsibility for any injury or other loss sustained during the activity or during transportation to and from the activity, as well as for any medical treatment.

Photo and Video Release

I hereby assign and grant to Child Evangelism Fellowship Inc., its subsidiaries and successors, and assign the unqualified right to the ownership, use and proceeds of all photographs or video of me or my minor child, without reservation or limitation, including use of photographs or video of me or my minor child for, but not limited to, advertising, educational and promotional purposes.

I agree to the Photo and Video Release Yes No

By signing this registration form you agree to the liability waiver .

Parent/Guardian's name: (Print) _____

Parent/Guardian's signature: _____

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