

VACATION BIBLE SCHOOL REGISTRATION 2013

미네소타 한인 장로교회 여름성경학교 2013



KPCM Children's Ministry 미네소타 한인장로교회 **invites you to VBS**

WHEN: JUNE 10th – 14th, 2013 Mon. ~Thurs. (월~목) 9:30 am~12:45 pm
FRIDAY NIGHT ROYAL FEAST & FINALE- 금요일 5:30pm~8:45

WHERE: 미네소타 한인 장로교회 Korean Presbyterian Church of Minnesota

WHO: CHILDREN Age 3 (by May 1st)~Grade 6 (School year '12-'13)

WHAT: WE WILL STAND STRONG WITH GOD'S LOVE THRU EPIC BIBLE ADVENTURES, TOURNAMENT GAMES, IMAGINATION STATION, SING AND PLAY ROCK, KING'S KITCHEN, ROYAL THEATER AND MUCH MUCH MORE!

FEE: \$20.00 per child (\$40 maximum per family) if received by May 26th after May 26th \$30.00 per child (\$60 maximum per family)

To register, please complete all pages attached including the Release and Permission Form. Return all forms and cash or check (made payable to KPCM Children's Ministry) to: **Korean Presbyterian Church of MN**

5840 Humboldt Ave N. , Brooklyn Center, MN 55430

QUESTIONS?? Please call Minah Lee 516-330-7155 or email her at minahlee531@gmail.com. We look forward to Rock'n the Castle down as we Stand Strong For God. This will be the most Regal VBS ever!

(Please Keep This Page)

미네소타 한인 장로교회 KPCM-Kingdom Rock

Vacation Bible School Registration Form

Child 1

Child 2

Child 3

| | | | |
|---|-----|-----|-----|
| Child's Name (Frist and Last) | | | |
| School Grade (2012~2013) | | | |
| Date of Birth Age | / / | / / | / / |
| T-Shirts Size YS 6-8, YM 10-12 YL 14-16, Adult S, Adult M | | | |
| Any medical condition? Y/N | | | |

E-mail: _____

Home telephone: _____ Address: _____

City: _____ State: _____ Zip: _____

Mother's name: _____ Phone: _____

Father's name: _____ Phone: _____

Contact Person: _____ Phone: _____

Family total: \$ _____ Parent Signature: _____

What church is your family registered with:



Consent and Release Form

I give permission to my child/children named below to participate in the Vacation Bible School at Korean Presbyterian Church of Minnesota. I understand that the Church, its Staff and its volunteers are not responsible for accidents that may occur, therefore, I will not place responsibility on the Church, its Staff and its volunteers in case of accident(s). In case of emergency, I authorize treatment and care of my child at any hospital, and authorize Korean Presbyterian Church of Minnesota to consent to treatment and care of my child. I will be responsible for the cost of treatment.

나의 자녀를 미네소타 한인장로교회에서 열리는 여름성경학교에 참석하는 것을 허락합니다. 여름성경학교 기간동안 어떠한 사고로 내 아이가 다칠 경우 미네소타 한인장로교회와 여름성경학교에서 봉사하시는 분들과 또한 관계되는 사람들에게 그 책임을 부여하지 않을 것을 약속합니다. 필요에 따라 나의 자녀를 여름성경학교 지도자의 판단으로 병원에 데리고 가 치료를 받게 할 수 있도록 조치하는 것을 허락하며 거기에 따르는 비용 전체를 부모인 내가 책임지고 지불할 것을 약속합니다.

Children's Names:

Parent (or legal guardian) Name:

Parent (or legal guardian) Signature:

Date Signed: _____