

# **Holy Spirit Parish VBS Staff & Helper Registration Form**

Please return to Religious Ed. Office, 3 E. Walnut St. Lock Haven, PA 17745; 570-748-7303 tnesbitt@dioceseaj.org

Name: \_\_\_\_\_

Age (if under 18): \_\_\_\_\_

Phone #: cell \_\_\_\_\_ home \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Address: \_\_\_\_\_

Parents' Names (if you are under 18): \_\_\_\_\_

Parents' E-mail Address(es) (if you are under 18): \_\_\_\_\_

Emergency contact (must be a parent if you are under 18) (NAME, RELATIONSHIP TO YOU, MOBILE #, HOME #)

Known allergies or medical concerns:

Which church do you normally attend? HSP \_\_\_\_\_ or Other \_\_\_\_\_

***\*If 14 or over you must complete all Youth Protection requirements. Contact the DRE or HSP Office for further information. The office staff will be checking to be sure everyone is in compliance.***

***Please check: I have \_\_\_\_\_ or I have not \_\_\_\_\_ completed the training/clearances.***

**“I do /do not (circle one) give my permission to be photographed or videoed during the week of VBS and grant permission to HSP to use my name, photograph and/or likeness in any newspaper write-ups, flyers, posters, VBS videos, or HSP Website only. Images or videos will not appear in any form of social media (Face Book, You Tube, Instagram ect...). Photo and Name will only be used in association with HSP VBS activities.”**

Signature & Date: \_\_\_\_\_

Parent/Guardian Signature if you are under 18: \_\_\_\_\_