



# Treasured Vacation Bible School Daycamp

**First United Methodist Church**  
 317 N 4th St, DeKalb, IL 60115  
 815-756-6301

## July 12-16

Early Bird  
 Deadline:  
**May 31**

Final  
 Deadline:  
**June 25**

→ VBS is an all day program, 9:15 am to 2:45 pm, for **elementary school** children **entering** kindergarten through 7th grade, and for **youth** 8th grade and older. Bus returns to church by 3:15 pm each day.

Participant #1		Gender	Grade Entering Fall 2021	Birth Date	T-Shirt Size circle one	Health Considerations/ Medications
Name					YS YM YL AS AM AL AXL	
<b>Circle level</b> Elementary Camper (entering kindergarten – 7th grade) Youth Volunteer (entering 8th—college)		<b>Bus to Walcamp</b> NO YES <input type="checkbox"/> <input type="checkbox"/>		<b>Bus back to church</b> NO YES <input type="checkbox"/> <input type="checkbox"/>		Please list any special instructions for bus (ex. will not take the bus on certain days)

Participant #2		Gender	Grade Entering Fall 2021	Birth Date	T-Shirt Size circle one	Health Considerations/ Medications
Name					YS YM YL AS AM AL AXL	
<b>Circle level</b> Elementary Camper (entering kindergarten – 7th grade) Youth Volunteer (entering 8th—college)		<b>Bus to Walcamp</b> NO YES <input type="checkbox"/> <input type="checkbox"/>		<b>Bus back to church</b> NO YES <input type="checkbox"/> <input type="checkbox"/>		Please list any special instructions for bus (ex. will not take the bus on certain days)

Participant #3		Gender	Grade Entering Fall 2021	Birth Date	T-Shirt Size circle one	Health Considerations/ Medications
Name					YS YM YL AS AM AL AXL	
<b>Circle level</b> Elementary Camper (entering kindergarten – 7th grade) Youth Volunteer (entering 8th—college)		<b>Bus to Walcamp</b> NO YES <input type="checkbox"/> <input type="checkbox"/>		<b>Bus back to church</b> NO YES <input type="checkbox"/> <input type="checkbox"/>		Please list any special instructions for bus (ex. will not take the bus on certain days)

Participant #4		Gender	Grade Entering Fall 2021	Birth Date	T-Shirt Size circle one	Health Considerations/ Medications
Name					YS YM YL AS AM AL AXL	
<b>Circle level</b> Elementary Camper (entering kindergarten – 7th grade) Youth Volunteer (entering 8th—college)		<b>Bus to Walcamp</b> NO YES <input type="checkbox"/> <input type="checkbox"/>		<b>Bus back to church</b> NO YES <input type="checkbox"/> <input type="checkbox"/>		Please list any special instructions for bus (ex. will not take the bus on certain days)

# Treasured DISCOVER YOU ARE PRICELESS TO GOD

Parent Name: \_\_\_\_\_ Parent phone # \_\_\_\_\_  
 Family Address: \_\_\_\_\_  

Street address
town, state
zip code
  
 Email address: \_\_\_\_\_

**Additional Contact:**

Name: \_\_\_\_\_ Relationship to child: \_\_\_\_\_  
 Phone # can be reached during camp hours: \_\_\_\_\_  
 Person(s) responsible for picking up my child(ren): \_\_\_\_\_  
 Phone # (if different than above listed) \_\_\_\_\_

Registration Costs	# of children enrolled		Cost per child	Total
Elementary (kindergarten - 7th grade in fall 2021)		x	\$55.00	
Youth (8th grade—college in fall 2021)		x	\$20.00	
Early Registration Discount (on or before May 31st)		x	Subtract \$5.00 per child	-
<b>Cost per family not to exceed \$120</b>			<b>Grand Total</b>	

Please check the box below if you made your payment online  
 Yes, payment was made online

## Scholarships

Partial scholarships are available for families in need. They are offered as a first come, first served basis and are limited in number. If you would like to request a scholarship, please mark your request below.

- I am requesting a *Pogo Scholarship*, and I am responsible for paying 50% of my child(ren)'s fee
- I am requesting a *Grace Scholarship*, and I am responsible for paying \$10 per child participating at VBS



### Lunch (for elementary and youth)

- I will provide my child(ren) with a lunch each day at camp
- I am requesting a lunch for my child(ren) each day at camp. Lunch consists of peanut butter sandwich, fruit, drink, & snack.

As parent/guardian of the above listed child(ren) I authorize the participation of, and accept responsibility for the attendance of my child(ren) at First United Methodist Church's Vacation Bible School Daycamp **July 12-16, 2021**. I certify that my child(ren) is/are in good health, and hereby authorize accompanying chaperones to act for me, according to their best judgment, in an emergency requiring medical attention. In addition I understand that my child(ren)'s photograph or video may be taken during the event. I hereby grant permission to First UMC to use my child(ren)'s photograph or likeness in any publicity or promotional publications, and to allow the news media to film and/or photograph programs and activities for broadcast purposes.

- I authorize photography of my child(ren).       I **do not** authorize photography of my child(ren).

\_\_\_\_\_  
Signature of Parent

\_\_\_\_\_  
Date

**Office Use Only:**  
 Date: \_\_\_\_\_  
 Amount: \$ \_\_\_\_\_  
 \_\_\_\_\_ Cash/Ck \_\_\_\_\_  
 Received by: \_\_\_\_\_