

First Pres Son Quest

Rainforest Adventure Volunteer Form

Volunteer Name _____

Male/Female _____

Email: _____

Address: _____

City, ZIP _____

Phone (H) _____ (C) _____

T-shirt Size: S M L XL

Areas of Interest:

- Preschool Elementary(k-4)

Circle all that apply: Games Crafts Music

Bible Study/Lesson Time Drama/Skits

Service Snack Prep Photography/Videography

Others: _____

**Son Quest Rainforest Adventure Volunteer
Childcare & Preschool Camp Registration ONLY
(Use Standard Registration Form for K-4th)**

PLEASE SIGN REVERSE

Child's Name: _____

Birth Date: ___/___/___ Male/Female

Sibling: _____

Birth Date: ___/___/___ Male/Female

Emergency Contact Name: _____

Emergency Contact Phone: _____

Allergies / Dietary Restrictions / Special Concerns:

Payment/Donation

VBS/Childcare 9:00-1:00 *Free of Charge!*

Donation (optional): _____

Total Payment / Donation Enclosed: _____

Make checks payable to FPCB and return to

Children's Ministries—VBS

FPCB | 2407 Dana St. | Berkeley, CA 94704

Volunteer Authorization and Release for Childcare/Preschool

I, the parent/guardian of (list all names):

_____,
a minor/minors, hereby authorize the directors or adult leaders or caregivers of First Pres Berkeley Rainforest Kids' Camp to act on my behalf while I am absent, and consent to any x-ray examination, medical, dental or surgical diagnoses, medical treatment and hospital care advised and administered by emergency personnel or health care providers. A representation of the First Presbyterian Church of Berkeley will attempt to contact me.

I hereby release First Presbyterian Church of Berkeley, its staff, teachers, agents and advisors, from responsibility and liability for any injury or illness that my child may sustain or from any claims, causes of action or demands that may arise in connection with my child's/children's participation in Son Rock Kids' Camp for any reason; including, but not limited to, claims of negligence of third parties in connection with, related to or as a result of any of these activities. This authorization shall remain in effect until revoked in writing and delivered to authorized agents of First Presbyterian Church of Berkeley.

By my signature below, I also give First Presbyterian Church of Berkeley permission to use, reprint and produce any photographs or videos taken of my child/children during his/her/their participation in church activities. I understand that these images will remain anonymous and be used for ministry purposes only.

Parent Signature _____

Date: _____