

Children's Ministries

Sign-up for Summer Fun!



Sports Camp

A high energy, Bible-based sports camp. Choose basketball, cheer, or soccer.

When: June 21-25, 4:00-7:00pm

Ages: Entering 1st - exiting 5th

Cost: \$65 per child

Vacation Bible School

SonQuest Rainforest, Follow Jesus on a Life-Changing Adventure!

When: July 12-16, 9:00am-12:00pm

Ages: Entering 1st - exiting 5th

Cost: \$35 for 1 child, \$50 for 2 or more

Note: for all events, children must be age-eligible for 1st grade in Fall 2010 and have completed Kindergarten. The Preschool program for VBS is for children of volunteers only, age 6-weeks through entering Kindergarten.

Have Questions?

Sports Camp: Brenda Black • brendagblack@yahoo.com

VBS Director: Sandie Powell • flukefancier@yahoo.com

VBS Registration: Jennifer Chiou • jchiou@valleycommunitychurch.org

VBS Volunteers: Brenda Black • brendagblack@yahoo.com

Valley Community Church

4455 Del Valle Parkway • Pleasanton, CA 94566
www.valleycommunitychurch.org • 925.846.6622

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Child #1

Child's Name _____ F M

Grade in Fall _____ Age _____ Birthdate _____

Tshirt size*: XS 2/4 S 6/8 M 10/12 L 14/16 XL 18/20

Sports Camp: Soccer Cheer Basketball

VBS: Preschool Elementary Friend: _____
(FOR CHILDREN OF VOLUNTEERS ONLY)

Child #3

Child's Name _____ F M

Grade in Fall _____ Age _____ Birthdate _____

Tshirt size*: XS 2/4 S 6/8 M 10/12 L 14/16 XL 18/20

Sports Camp: Soccer Cheer Basketball

VBS: Preschool Elementary Friend: _____
(FOR CHILDREN OF VOLUNTEERS ONLY)

Child #2

Child's Name _____ F M

Grade in Fall _____ Age _____ Birthdate _____

Tshirt size*: XS 2/4 S 6/8 M 10/12 L 14/16 XL 18/20

Sports Camp: Soccer Cheer Basketball

VBS: Preschool Elementary Friend: _____
(FOR CHILDREN OF VOLUNTEERS ONLY)

Child #4

Child's Name _____ F M

Grade in Fall _____ Age _____ Birthdate _____

Tshirt size*: XS 2/4 S 6/8 M 10/12 L 14/16 XL 18/20

Sports Camp: Soccer Cheer Basketball

VBS: Preschool Elementary Friend: _____
(FOR CHILDREN OF VOLUNTEERS ONLY)

**Note: Tshirts come with Sports Camp and VBS only.*

VBS Volunteers

Areas for Volunteering: **Craft** (HS and Adult only), **Crew Leader Assistant** (5-day commitment, MS/HS only), **Crew Leaders** (5-day commitment, Adult only), **Floaters** (HS and Adult only), **Photographer** (Adult only), **Recreation** (Adult only), **Snack** (HS and Adult only)

If you are a volunteer under 18, your parent needs to fill out the Parent Information section on the reverse.

Adult Volunteer _____ Contact # _____ Email _____

I can help: all 5 days OR only on: Mon Tues Wed Thurs Fri

Top 3 choices: 1. _____ 2. _____ 3. _____

MS/HS Volunteer _____ Contact # _____ Email _____

Age/Grade _____ I can help: all 5 days OR only on: Mon Tues Wed Thurs Fri

Top 3 choices: 1. _____ 2. _____ 3. _____

MS/HS Volunteer _____ Contact # _____ Email _____

Age/Grade _____ I can help: all 5 days OR only on: Mon Tues Wed Thurs Fri

Top 3 choices: 1. _____ 2. _____ 3. _____

Crew Leaders/Assistants Only

Preferred Crew Leader Assistant: _____ Do you want to lead your child's crew? If yes, name: _____

Tshirt size: Small Medium Large XLarge

Almost done! Over for parent information...

Parent Information

Parent(s)/Guardian(s) _____ Home # _____

Email _____ Cell # _____

Address _____ City, State, Zip _____

Any Allergies? _____

Special Instructions? _____

Emergency Contact _____ Emergency Number _____

Medical & Liability

We realize that no activity is without the possibility of unforeseen hazards which could result in injury to an individual. As a parent or guardian, you are to be aware of your responsibility to instruct your child of the importance of conduct which will insure safety and an enjoyable time while participating in this activity. By signing this form, you, as a parent or guardian, agree to assume the risks and hazards which are inherent in this kind of activity. You also agree to absolve and hold harmless Valley Community Church (VCC) and their representatives for damage, loss or injuries to the child for whom you sign.

I give my child(ren), _____, permission to participate in this activity, and give my permission to the leaders of this function to authorize any treatment deemed necessary by a licensed physician due to accident or illness during this activity.

Parent/Guardian Signature _____ Date _____

Registration Fees

Sports Camp: \$65 x ____ child(ren) = \$ _____

Vacation Bible School: \$35 for 1, \$50 for 2 or more = \$ _____
(count elementary children only, preschool is free for volunteers)

TOTAL: \$ _____

Make checks payable to: Valley Community Church

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