

VACATION BIBLE SCHOOL 2025



Excelsior United Methodist Church

July 28th – 31st

5:30 - 8:00 PM

4 years – completed 5th grade
(6th grade and older can volunteer to help)

\$30/child, \$75/family max
(Dinner and t-shirt included!)

Questions? Contact Kallie Stroh at kallie@excelsiorumc.org

Parents/Guardians Names: _____

Address: _____

Phone 1: _____ Phone 2: _____

E-mail Address: _____



Child 1

Child's Name: _____

Date of Birth: _____ Grade entering in the fall: _____

Please describe any special needs, diagnosis, allergy, or health restrictions: _____

T-shirt size (Youth small – Adult 2XL available. Please indicate if youth or adult size): _____



Child 2

Child's Name: _____

Date of Birth: _____ Grade entering in the fall: _____

Please describe any special needs, diagnosis, allergy, or health restriction: _____

T-shirt size (Youth small – Adult 2XL available. Please indicate if youth or adult size): _____



Child 3

Child's Name: _____

Date of Birth: _____ Grade entering in the fall: _____

Please describe any special needs, diagnosis, allergy, or health restrictions: _____

T-shirt size (Youth small – Adult 2XL available. Please indicate if youth or adult size): _____

Volunteering



Join the VBS team as a volunteer! You can help in many different ways. Vacation Bible School is rotation style. Both small group leaders and rotation site leaders are needed. A background check will be required for all volunteers. If you would like to volunteer, please indicate your interest below:

Name/s: _____

Phone: _____ E-mail: _____

I am interested in helping with: _____

Emergency Contact

Name: _____ Relationship: _____ Phone: _____

Medical Release I give my permission for my child(ren) to attend Vacation Bible School at Excelsior United Methodist from July 28 – 31st, 2025. In the event of an emergency where medical treatment is required, and I or named contacts are unable to be reached by phone, I authorize the church staff sponsors of this event to obtain the services of a licensed physician. Please attempt to notify me immediately concerning any such emergency.

Parent/Guardian signature: _____ Date _____

Photo Release



I, _____, parent/guardian of

The minor/s _____

- give permission
- do **not** give permission

for images of my child to appear in church publications, on the church website, in church videos, promotional literature, advertisements and other printed/electronic material.

Signature _____ Date _____

(For partial permissions, e.g., permission for child to appear in printed material and VBS recap slideshow shown in worship, but not online media, such as website, please specify below and sign.)