



# "Give us this day our daily bread"

- Matthew 6:11

Pioneer Church is thrilled to announce that registration for our 2023 Vacation Bible School (VBS) is now open!

**JOIN US JUNE 26-30, 9:00-12:00**

All children ages 3 and up are invited to join us as we become Chefs and explore Bible stories about food. Together we will discover how we can turn to God in prayer every day to meet our needs, and how we can join God in providing for the needs of others. Each morning will begin with a high energy assembly time during which we introduce the theme for the day, followed by activity station rotations in small groups. Interactive Bible Stories will reveal "Daily Specials" to equip your Chefs for an active life with God. Chefs will expand on the "Daily Special" by making art projects at the Craft Station, singing new songs at the Music Station, exploring the wonders of God's creation at the Science Station, playing games at the Recreation Station, and enjoying tasty treats at the Snack Station.

**TWEEN MISSION OPPORTUNITY** - Our afternoon mini mission projects were a great success last year, and we are delighted to offer this fun opportunity again this summer. Tweens (ages 10+) who are interested in participating will work as station assistants during the morning program, eat a packed lunch at the church, and then participate in a different mission experience together each afternoon. Current plans include helping at Rescue Village, sewing pillowcases for children who have experienced trauma, providing trail maintenance for a local park, and creating supply bags to give to those in need. We hope your older children will consider joining us!

**SAFETY IS OUR PRIORITY** - Pioneer takes keeping children safe and healthy very seriously. All of our volunteers are background checked, trained in child protection best practices, and work in pairs. We will also take appropriate steps to mitigate the spread of illness during camp, including holding activities outdoors as weather permits, promoting good hygiene and frequent hand washing, and frequently cleaning shared supplies. If you would like more information regarding any of our safety practices, please feel free to ask.

In order to register your child(ren) for VBS, please complete one copy of the contact information page per family, and one copy of the medical information page per child. Completed registrations can be mailed to the church, submitted by email to [vbs@pioneersolon.org](mailto:vbs@pioneersolon.org), or dropped off in person weekdays between 9am-3pm. Thanks to the support of Pioneer members, VBS is entirely free of charge. If you would like to make a donation to support future VBS programs at Pioneer, you can do so via our website: [www.pioneersolon.org](http://www.pioneersolon.org)

Please feel free to reach out with any questions you might have. Space is limited, so don't delay to secure spots for your children! We can't wait to see them at VBS!

Lisa M Nester  
Faith Formation Coordinator



## 2023 VBS Registration Form

### Contact Information

Pioneer Memorial Presbyterian Church

35100 Solon Road \* Solon, Ohio 44139

440.248.5260 \* [www.pioneersolon.org](http://www.pioneersolon.org)

E-mail: [vbs@pioneersolon.org](mailto:vbs@pioneersolon.org)

Parent/Guardian Name(s) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Primary Phone # \_\_\_\_\_ Primary Phone # \_\_\_\_\_

Alternate Phone # \_\_\_\_\_ Alternate Phone # \_\_\_\_\_

E-mail \_\_\_\_\_ E-mail \_\_\_\_\_

Child's Name	Birth Date	Age	Grade(22-23)
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**Person responsible for picking child up if other than parent/guardian**

Name \_\_\_\_\_ Phone \_\_\_\_\_

### ***EMERGENCY CONTACT INFORMATION***

Name _____	Name _____
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Relationship to child _____	Relationship to child _____
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Phone _____	Phone _____
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Home Faith Community (if any) \_\_\_\_\_

Indicate any group placement requests (not guaranteed): \_\_\_\_\_

# 2023 VBS Registration Form

## Medical Information & History

Please complete one for each child

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Allergies \_\_\_\_\_

Medications \_\_\_\_\_

Medical Conditions \_\_\_\_\_

Other \_\_\_\_\_

Physician Name \_\_\_\_\_ Clinic \_\_\_\_\_ Number \_\_\_\_\_

Dentist Name \_\_\_\_\_ Clinic \_\_\_\_\_ Number \_\_\_\_\_

### MEDICAL AUTHORIZATION

I give my permission for full participation in Pioneer Memorial Presbyterian Church VBS 2023. In the event that any of the other Emergency Contacts listed cannot be contacted, I hereby give my permission to the adult lead-ers in charge to secure proper treatment, including hospitalization, anesthesia, surgery, or injections of medica-tion for my child.

Signature of parent/guardian: \_\_\_\_\_ Date: \_\_\_\_\_

### PHOTO CONSENT

I give my consent for Pioneer Memorial Presbyterian Church to use or reproduce any photographs in which my child may appear solely for the purposes of publicity and promotion of it's current and future events, activities, or programs in print, on the Pioneer Memorial Presbyterian Church website ([www.pioneersolon.org](http://www.pioneersolon.org)), and/or on the Pioneer Memorial Presbyterian Church Facebook page (<http://www.facebook.com/pioneerchurch>).

Signature of parent/guardian: \_\_\_\_\_ Date: \_\_\_\_\_

### TRANSPORTATION CONSENT (Mission participants only)

I give my consent for volunteers and staff of Pioneer Memorial Presbyterian Church to transport my child to and from VBS activities during the week of June 26-30, 2023. By signing, I hereby release Pioneer Memorial Presbyterian Church, as well as its officers, servants, volunteers, and em-ployees from all liability or damages for any and all injuries arising from the negligence of any of the above while traveling to this activity via private transportation.

Signature of parent/guardian: \_\_\_\_\_ Date: \_\_\_\_\_

### HOLD HARMLESS AGREEMENT

Please read this form carefully and be aware that in registering yourself and/or your child/ward for participation in the above program, you will be waiving and releasing all claims for injuries or illness you and/or your child/ward might sustain arising out of the above program.

I recognize and acknowledge there are risks of injury and illness to participants in the above program(s), includ-ing possible exposure to COVID-19, and I agree to assume the full risk of any such injuries, illnesses, damages or loss, regardless of severity, which my child/ward and/or I may sustain as a result of participating in any activi-ties connected with and/or associated with any such program(s). I waive and relinquish all claims my child/ward and/or I may have against Pioneer Memorial Presbyterian Church and its officers, servants, volunteers, and em-ployees as a result of participating in the above program. I hereby fully release and discharge Pioneer Memorial Presbyterian Church and its officers, servants, volunteers, and employees from any and all claims of injuries, illness, damage, or loss which my child/ward and/or I may have or which may accrue to me/and/or my child/ward on account of my participation or the participation of my child/ward in the above program. I further agree to indemnify and hold harmless and defend Pioneer Memorial Presbyterian Church and its officers, servants, volunteers and employees from any and all claims resulting from injuries, illnesses, damages and losses sus-tained by me and/or my child/ward and arising out, connected with, and/or in any way associated with the activi-ties of the program.

I have read this waiver and understand my signature is required below in order to participate in Pioneer Memorial Presbyterian Church's Vacation Bible School Program.

Signature of parent/guardian: \_\_\_\_\_ Date: \_\_\_\_\_