**Code of Conduct for Vacation Bible School**

**I agree to:**

1. If your child exhibits unacceptable behavior while at Vacation Bible School, you may be called and asked to pick them up. Your child may be asked not to return for the remainder of VBS.

2. You must have reliable transportation for your child and your child needs to be picked up at the church sanctuary by 12 p.m. You also must “check-out” your child--please do not just leave with your child until you have let an adult volunteer know that you are leaving. Please also have your child at VBS no later than 9 a.m. and bring them to “check” them in at the registration table.

3. Vacation Bible School will be full of activities, games, and a lot of fun! For that reason, other belongings such as video games, cell phones, toys, hair supplies, etc., should be left at home. Grace Baptist Church is **NOT** responsible for items that are lost or stolen.

4. If your child owns a cell phone, we request they not bring it to Vacation Bible School. Your child will have access to a phone to call you if they need to, but they do not need to have a cell phone during VBS.

5. I will not send my child to VBS with a fever or any noticeable illness.

**I grant permission:**

* I give my permission for my child(ren) to participate in Vacation Bible School taking place June 3rd-7th at Grace Baptist Church. I understand the known risks involved in the program for my child(ren) in consideration of Grace Baptist Church allowing us to participate in the program. I hereby fully release and forever discharge the parties named above, along with heirs, officers, agents, employees, and volunteers.
* In the event of illness or accident, having parental responsibility for the above-named child(ren), I give permission for the first aid to be administered where considered necessary by a person trained in first aid, if available, or medical treatment to be administered by a suitably qualified medical practitioner.
* If I cannot be contacted and my child(ren) should require emergency hospital treatment, I authorize an adult leader to sign on my behalf any written form of consent required by the hospital. However, I understand that every effort will be made to contact me as soon as possible.
* I understand that by my child(ren)’s participation in this church youth activity his/her picture could be taken and used in press releases, brochures, video, CD/DVDs, websites, etc. for publicity use only.