



VANCOUVER
BIBLE FELLOWSHIP

Children's Ministry Family Information

Parent's/Guardian's Name(s):

Address:

Email:

Phone Home:

Work:

Cell:

Emergency Contact (other than parent above):

Name:

Phone:

CHILDREN (only those who will be involved with Children's Ministry):

Name: _____

Date of Birth: _____

Name: _____

Date of Birth: _____

Name: _____

Date of Birth: _____

Name: _____

Date of Birth: _____

Name: _____

Date of Birth: _____

Please list any SPECIAL CONCERNS OR NEEDS for any of the above children (i.e. allergies)

FOR NURSERY ONLY:

➤ Can your child have **animal crackers** during snack time? (circle one) YES NO

➤ If your child begins to **cry** when should we page you? (circle one)

Right away

or

after attempts to calm him/her have failed

or

Other:

PLEASE TURN OVER TO COMPLETE THIS FORM →

Psalm 127:3 Behold, children are a gift of the LORD; The fruit of the womb is a reward.



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Children’s Ministry Family Information – Part 2 – CONFIDENTIAL

Please fill out this portion of the form to help us provide a safe and healthy environment for children in our care.
Thank you!

*“Do nothing from selfishness or empty conceit, but with humility of mind let each of you regard one another as more important than himself; do not merely look out for your own personal interests, but also for the interests of others.”
Philippians 2:3-4*

Do any of your children have any communicable diseases (examples: Hepatitis B, MRSA)? (please circle appropriate) YES NO Choose not to answer

If you answered **anything other than “no”** to the question above, prior to participating in children’s ministry, we would ask if you would be willing to have a consultation with VBF Children’s Ministry Director or VBF Pastor for the greater good of the children in our care. Thank you for your understanding.

Are your children vaccinated with the immunizations required in your state? (please circle appropriate)

YES NO Declined some, but not all required vaccinations Choose not to answer

If you answered **anything other than “yes”** to the immunization question above, prior to participating in children’s ministry, we would ask if you would be willing to have a consultation with VBF Children’s Ministry Director or VBF Pastor for the greater good of the children in our care. Thank you for your understanding.

VBF Children’s Ministry Requirement for Participation¹

To protect the most vulnerable children in our care against life-threatening communicable diseases, such as measles and whooping cough, **we require the following for participation in the nursery (0 – 2 years) and weekday childcare² for younger children (3 – 5 years):**

- At a minimum, DTap* and MMR** vaccinations, administered according to the standard medical immunization schedule.

*DTap= Diphtheria, Pertussis (Whooping Cough), Tetanus

MMR=Measles, Mumps, Rubella (MMR is administered **at 12 months old per standard immunization schedule)

¹**Please note that there is no vaccination requirement for children attending Sunday School classes (ages 3+).**

²During the weekday Bible Study childcare, 3-5 year old children will, at times, share room with nursery-aged children.

I acknowledge that the child/family information in this application is correct to the best of my knowledge.

I acknowledge that I read and will abide by the VBF Children’s Ministry Requirement for Participation.

Parent/Guardian Signature

Date

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Children's Ministry Family Information – Part 3 – PERMISSIONS

Please fill out the sections below only if they apply to your children. Thank you!

*"Do nothing from selfishness or empty conceit, but with humility of mind let each of you regard one another as more important than himself; do not merely look out for your own personal interests, but also for the interests of others."
Philippians 2:3-4*

PERMISSION FOR RELEASE OF CHILD TO AUTHORIZED PICK-UP (3-6 Years Old Classes ONLY)

Please complete this section to authorize someone other than parents to pick up your child.

Name of child(ren): _____

Name of person authorized to pick up my child (adult only!): _____

Parent/Guardian Signature

Date

PERMISSION FOR OLDER CHILD(REN) TO LEAVE CLASSROOM WITHOUT PARENTAL ESCORT

Name of Child	Sunday School 7 AND 8 YEARS OLD CLASS ONLY!	Wednesday Night Childcare 6-8 YEARS OLD CLASS ONLY! *
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>

As indicated above, these children have my permission to leave either 7 & 8 Years Old Sunday School Classroom and/or 6-8 Years Old Wednesday Night Classroom on their own, after the end of the class. I understand that once my child leaves the classroom, I am fully responsible for their safety and for contacting the appropriate teacher to inquire about my child's conduct in class.

*** I also acknowledge that on Sunday morning, I am still required to sign out my six-year-old child from 5-6 Year Olds Sunday School class at the end of the class. ****

****This policy helps Sunday School teachers ensure safe dismissal of all children in the 5-6 Year Olds class.**

NOTE: To minimize class disruptions and ensure your child does not have to miss part of a Bible lesson, please make sure your child uses restroom prior to coming to Wednesday and Sunday classes. Thank you.

Parent/Guardian Signature

Date

Psalm 127:3 Behold, children are a gift of the LORD; The fruit of the womb is a reward.