



## Centerville VBS 2024 Adult Registration Form

### Adult Volunteer Information:

Name \_\_\_\_\_

T-shirt Size: \_\_\_\_\_ adult

Street Address: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Home church: \_\_\_\_\_

### In case of emergency, please contact:

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

Relationship: \_\_\_\_\_

**Any Special Needs to be aware of ?** (Medical, dietary, Allergies, Other?)

Please return this form along with Photo Release by mail to :  
St. Mary's, 828 S 18th St, Centerville, IA 52544

Or in person to any of the participating Churches of Common Ground:  
*First Lutheran, First United Methodist, Faith United Methodist,  
Drake Avenue Christian, St. Mary's Catholic, and First Presbyterian.*



## Photo Release for Adults

As an adult volunteer,

(name of adult) \_\_\_\_\_

the sponsoring churches of Common Ground and Centerville's Summer VBS has my permission to use my photograph publicly in VBS materials.

I understand the images may be used in print publications, online publications, presentations, websites, and social media.

I also understand no royalty, fee, or other compensation shall become payable to me by reason of such use.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_