

**From EAST to WEST, the powerful LORD GOD has been calling together everyone on earth.
PSALM 50:1**



**Trinity Lutheran Church
St. John's Lutheran Church
2010 Baobab Blast**

Adult Participant and Volunteer Registration Form

June 21~25 6:00~8:00 p.m.

**(Please fill out and return to Trinity Lutheran Church
527 Washington Street: Attn. Deaconess Deborah.)**

Name _____

E-Mail _____

T-Shirt Size _____

Telephone: Home _____

Cell _____

I, the undersigned, hereby authorize a representative of Trinity Lutheran Church to consent to and authorize the administration and performance of all treatments that may be considered necessary in the judgment of attending physicians, in the event I should be admitted to any hospital, or be in need of any medical treatment. This authorization shall continue for such time as I am participating in the event.

Signed _____

Date _____

Signed _____

Date _____

(Parent or guardian if under 18)

Allergies _____

Medications required: _____

Person/s to notify in an emergency:

1. _____ Phone _____

2. _____ Phone _____

No one will be permitted to attend any programs without a signed medical release form.

_____ **I would like to participate in the Adult Baobab Blast Track
(Bible Study and Discussion Group for Adults)**

_____ **I would like to help with:**

_____ Nursery/Young Child Care

_____ Greeting Guests/Hospitality/Navigating

_____ Small Group Guide (accompanies kids to all activities)

_____ Crafts _____ Music _____ Worship/Drama

_____ Meal Preparation _____ Meal Service

_____ Clean- up _____ Games

_____ Friday evening Picnic/Cook-Out

Thank you for your help and support for our Learning Ministries!