

EMERGENCY MEDICAL
RELEASE

I/We _____(parent/
guardian) give permission to administer Emergency medical
care for the child(ren) listed on the registration from when
I/We cannot be reached at the time of emergency. I/We
will be responsible for the Emergency medical charges upon
receipt of all billing statements in the event Emergency care
is required. I/We have indicated our hospital of choice,
doctor's name and phone number as indicated below. Chi-
nese Christian Church of Greater Albany and its associates
are released from any and all responsibilities in regards to
decisions made during the time of an emergency. In the
events that I/We cannot be reached, an associate from
Chinese Christian Church of Greater Albany has the au-
thority to make an Emergency decision, based upon the
advice of the doctor in charge, to administer treatment if
necessary.

Preferred Hospital of choice:

Doctor's Name: _____
Doctor's Phone: _____

Where can you be reached in case of an emergency?
Phone: _____

I/We understand and agree to the emergency release as
stated above:

Parent/Guardian Signature Date: _____

Pick-up Policy

I/ We _____
(parent/guardian) will pick up our own child(ren) at:
12:00pm / 3:30pm

****If you will not be picking up your child(ren), please indi-
cate the authorized person responsible.**

I/We authorize only persons listed below to pick up my
child(ren) from VBS at CCCGA. I/We understand that any
change to this request must be done in writing and pre-
sented to VBS Director during pick up the day before, or,
during drop off that morning. This policy will be strictly
enforced to insure the safety of the children:
Pick Up Time: 12:00pm / 3:30pm

Pick Up Person: _____
Relationship: _____
Phone: _____



Chinese Christian Church of
Greater Albany
901 Madison Ave
Albany, NY
www.cccga.org



紐約首府華人基督教會

CHINESE CHRISTIAN CHURCH
OF GREATER ALBANY

兒童聖經學校

VACATION BIBLE SCHOOL 2011

DATE: 8/15-8/19

TIME : 8:30AM-12:00PM

LOCATION: 901 MADISON AVE
ALBANY, NY

CONTACT: GLORIA FUNG
PHONE:(518)253-8741
Email: gloriafung@yahoo.com



Come and join us to experience
Jesus' great power!

"We believe and are sure that
thou art that Christ, the Son of
the Living God" (John 6:69)



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OVERVIEW

Framework
Rev It Up! Full Throttle for God is a gospel-centered curriculum that weaves the salvation message into each lesson. It's built around a solid theological framework and motivated by a desire to teach Bible truths using age-appropriate methods.

Rotations
The 2011 VBS program's flexible rotational model allows you to maneuver through various points of the Rev It Up! Speedway:

Your racing teams will meet together for a time of worship and singing during the Opening & Closing Assemblies. They may even get to meet Speedy the racing turtle (puppet), the official race mascot! Your team meets daily to get refueled through Bible Exploration time. You'll have fun fixing crafts and playing games! And of course, your teams will enjoy snacks—some that you even make yourself!



LESSONS

- Welcome to the Team:** Luke 5:1-15
Jesus Call His Disciples
- Learn from the Best:** Mark 5:21-43
Jesus Shows His Power
Luke 8:40-56
- Run Up the Caution Flag:** Matt. 20:17-28
Who Is the Greatest?
Mark 10:32-52
- Jesus in the Winner's Circle:** John 20:1-22
Jesus Is the Victor!
Acts 1:8-11
- Full Speed Ahead:** Acts 3:1-10
Peter and John Carry On
Acts 4:1-24

2011 VBS REGISTRATION FORM

Parents/ Guardian:

Address: _____

Home Phone: _____

Cell Phone: _____

E-mail Address: _____

Emergency Contact: _____

Child's Name	Birthday mm/dd/yy	Grade as of (9/3/11)	Boy/ Girl

Emergency Phone: _____
Special needs (Allergies to food or Medical Information):

o Ride needed _____ o Can Provide Ride for _____

Cost: \$10.00 per child (8:30am-12:00pm);
\$15.00 per child (8:30am-3:30pm, including lunch)

Please make check payable to: CCCGA
and send both registration form and fee to: Gloria Fung
267 Longhouse Lane, Slingerlands, NY 12159

For Official Use Only:

Method of Payment
o Check: \$ _____ o Cash: \$ _____ Total: \$ _____

Check No: _____ Date Received _____