

Vacation Bible Camp

June 21-25, 9-11:30am



Registration Form

Family Name _____

Address _____

City _____ Zip code _____

Home Phone _____ Cell phone _____

Parent's Name(s) _____

Parent's work phone(s) _____ Email _____

Emergency Contact Person _____ Phone _____

Please list any allergies or special conditions of which we should be aware: _____

In the event of illness or injury, I do hereby consent to whatever x-ray examination, anesthetic, medical, surgical, dental diagnosis, or treatment and hospital care are considered necessary in the best judgment of the attending physician, surgeon, or dentist and performed by or under the supervision of a member of the medical staff of the hospital or facility furnishing medical or dental services.

I fully understand that students are to abide by all rules and regulations governing conduct and safety while attending Vacation Bible Camp activities. Any violation of these rules and regulations may result in that individual being sent home.

June 26, 2021

Signature of parent/guardian

Date

Date effective until

\$ 10.00 per child + One large container of juice per family (bring juice 1st day of Camp)

Child's Name _____	Grade _____	Date of Birth _____
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Campers must be age 4 by August 1, 2021. Volunteers must be at least 6th graders in August.

Cash donations are greatly appreciated!

Thanks, in advance, for all your help!

**Please return registration forms to the parish office by
June 14th.**

