



**Saint Augustine and Holy Name of Mary Parishes invite kids entering K – Grade 5 (PK 4 year olds are welcome to attend if they meet PK guidelines) to join us for
 Vacation Bible School at St. Augustine Parish Center.
 Tuesday, June 23 to Friday June 26 at 8:45AM – 12:00PM
 Cost: \$5 per child
 (Lunch and morning snack will be provided daily)**

Family's Last name _____

Email address where you would like to receive communication about VBS:

(Please Print Clearly)

Home phone number: _____

Family address:

Father/Guardian information:

Father/Guardian address (if different than family address listed above)

Mother/Guardian information:

Mother/Guardian address (if different than family address listed above)

Name of Home Parish (if you have one)/ Other: _____

Camper Information

Name of Camper	Grade in 2014-15	Allergies ***	Medical Conditions ***

***Please list any specific information that we may need in order to provide for allergies, health

considerations, or special education needs for your child. If your child does have a food allergy it is required for us to have a doctor's note with specifics to ensure safety and lunch accommodations. Doctor's note is required with registration form.

Name(s) of sibling(s) participating as a camp worker:

Emergency Contact Information

Name of Emergency Contact: _____

Relationship to child: _____

Number where contact may be reached during the hours of VBS:

Photo Release Consent

Yes – I consent to the use by St. Augustine and Holy Name of Mary Parish of any videotape, photograph, slide, audiotape, parish website or any other audio reproduction in which my child/children or I may appear. I release the staff, volunteers, etc. of St. Augustine and Holy Name of Mary from any liability connected with the use of my child's/children's picture or voice recording as part of the activities held at St. Augustine during VBS.

Please print your name

Signature

Date

Volunteer Opportunities:

I am willing to:

_____ **Donate (\$\$\$)**

_____ **Volunteer at VBS (crafts, serve lunch, games)**

_____ **Complete prep work.**

Return this from to:

St. Augustine or Holy Name of Mary Parish offices ASAP. Registration Deadline is: Tuesday, June 9 (Early Registration Thursday, May 14)

If you have questions regarding VBS registration

Contact Andrea Willett, 270-692-3019 Ext. 8

STAFF ONLY

Paid: _____ **Cash** _____ **Check #** _____