

# St. Francis of Assisi Vacation Bible School



## Super Sacraments VBS

Come learn about the super powers of the 7 Sacraments!



**July 22-26**

From 8 am—1 pm in the Teutopolis Mini Park

(Weather permitting! In case of bad weather, we will move to TGS Cafeteria.)

This program is for **PRESCHOOL/KINDERGARTEN KIDS** and will run the same time as Totus Tuus.

**REGISTRATION DUE June 21**

\$10.00 per child or \$30.00 per family

Registration forms are available online or in the back of church.

Please return to the office, in a sealed envelope in the Sunday collection basket marked VBS,  
or mail to the parish office at St. Francis Church, PO Box 730, Teutopolis, IL 62467

## 2019 VBS REGISTRATION FORM

**Participants: Children—preschool (4 by June 30) - Kindergarten (fall of 2019)**

Name \_\_\_\_\_ Grade entering this fall \_\_\_\_\_

Name \_\_\_\_\_ Grade entering this fall \_\_\_\_\_

Name \_\_\_\_\_ Grade entering this fall \_\_\_\_\_

### JUNIOR HIGH/HIGH SCHOOL HELPERS

The helpers have as much fun as the participants!

Incoming 7th graders and older are invited to help with this program!

Name \_\_\_\_\_ Days Available \_\_\_\_\_

Name \_\_\_\_\_ Days Available \_\_\_\_\_

### PARENT HELP

In order for the program to run smoothly, we need parental help! Please check the way in which you'll help for the program.

I would love to help out in the following way:

Crafts \_\_\_\_\_ Snacks \_\_\_\_\_ Games \_\_\_\_\_ Days Available \_\_\_\_\_

Call me for craft supplies \_\_\_\_\_ Call me for snack ingredients \_\_\_\_\_

As a participant in this program, I recognize & acknowledge that there are certain risks of injury & I agree to assume the full risk of any injuries, which my children may sustain as a result of participating in this activity. I further agree to waive & relinquish claims, fully release & discharge & agree to indemnify & hold harmless & defend St. Francis parish, the Diocese of Springfield & all volunteers & agents from any & all claims resulting from injuries/death, sustained by my children.

I also give permission for my child's photo to be taken & used for ministry purposes.

Parents Names \_\_\_\_\_ Parent Email \_\_\_\_\_

Parent's Signature \_\_\_\_\_ Phone # \_\_\_\_\_ Cell # \_\_\_\_\_

Allergies or other special conditions that apply to the participant: \_\_\_\_\_