

VACATION RIBLE SCHOOL REGISTRATION FORM

Summer Religion Sessions (Vacation Bible School) are scheduled to begin **Monday, June, 25** and conclude **Friday, June 29, 2018** at **Holy Rosary Gym, Lima, WI**. The theme is **"Come, Meet Jesus"**. It is open to all Catholic and Public School students four years old through fifth grades. Sessions **will meet from 5:30 P.M. to 8:00 P.M.**

The **cost is \$30 for one child or \$55 per family for 4 year olds through 5th grade.**

If you are interested, please fill out the form below. Return it and the money to: Linda Schaub, Director of Religious Education, 901 W. Prospect Ave., Durand, WI. 54736

OR: You may place it in the collection basket marked Linda Schaub, Vacation Bible School or bring it to the Religious Ed. Office.

Vacation Bible School Registration

What: Summer Religion Sessions (Vacation Bible School) Theme: "Come, Meet Jesus"

Who: Children 4 years old through fifth grades from Catholic and Public Schools

Where/When: Holy Rosary, Lima, Monday, June 25 through Friday, June 29, 2018

Times: 5:30 P.M. to 8:00 P.M.

Cost: \$30 for 1 or \$55 per family. **(Make all Checks payable to "Tri - Parish")**

Deadline: **All Registrations MUST be in by June 15, 2018**

Child's Name: _____ Grade Entering: _____

Parent's Name: _____

Address: _____

City: _____ Zip: _____ Cell Phone: _____

E-mail: _____

Emergency Contact (If parent is not available): _____

Emergency Contact Phone Number: _____

Allergies/Other Medical Conditions or taking medication (list): _____

Name of Home Parish: _____

I can send a treat for one day. YES NO (circle one)

Name of Parent(s) or any 6th through 12th grade student(s) willing to be an aide or teach: Please print:

Name: _____

Address: _____

Phone Number _____ e-mail _____

Which day(s) will you help? ___ Mon. ___ Tues. ___ Wed. ___ Thurs. ___ Fri. Check as many as you are able to help.

The above named PARTICIPANT agrees to defend, protect, indemnify and hold harmless the above named PARISH against and from all claims arising from the negligence or fault of the above named PARTICIPANT or any of their agents, family members, volunteers, helpers, partners, organizational members or associates which arise out of the above named ACTIVITY at the ABOVE PARISH.

Additionally, the above named PARTICIPANT agrees to protect defend, hold harmless and fully indemnify the above named PARISH for any claim or cause of action whatsoever arising out of the above mentioned ACTIVITY that is brought against the PARISH by the above named PARTICIPANT or their family members whether such claim arises from the alleged negligence of the PARISH, its employees or agents or PARTICIPANT'S negligence. If any portion of this agreement is held invalid, it is agreed that the balance thereof shall continue in full legal force and effect.

Parent's Name (**Printed**) _____

Signature: _____ **Date:** _____