

St. Henry Vacation Bible School 2019

Registration Form

REGISTRATION GUIDELINES

COST: FREE! Donations accepted. Campers in grades 1-6 will need to bring a sack lunch each day!

T-SHIRTS: T-shirts will be available for purchase at \$10 each during the Potluck by Totus Tuus.

MARCH 1-JUNE 7: Registration is open to all area parishes. Children are accepted on a first-come, first-served basis. We can accept a maximum of 100 children so register early to get a spot! Grades are based off which grade entering in the fall.

***REGISTRATION FORM and MEDICAL RELEASE FORM MUST be received for registration to be complete.**

*Forms are available online at www.sthenryparish.com under the Faith Formation Tab and then VBS tab and in the main vestibule in church.

*Drop forms in collection basket at mass or mail forms to the Parish Office: 6696 Springboro Pike, Dayton OH 45449, Attn: VBS

*Need more information? Please contact: Megan Deaton at (937) 434-9231 or mdeaton@sthenryparish.com

Family Name _____ Home Phone _____ Cell Phone _____

Emergency Contact Name and # during VBS hours _____

Home Address _____
(street address) _____ (city) _____ (zip code)

Email Address* _____ Parish _____

*Group assignments and other vital information will be sent via email. Please provide the email address you check most often.

Early Childhood Program

Date: Monday-Friday, June 17th-21st **Time:** 9am-11:30am **Location:** PMR

PRE-K and KINDERGARTEN REGISTRATION

*** If not potty-trained, a responsible adult must attend. All adults need to be Virtus trained.**

First Name	DOB (MM/DD/YYYY)	Grade Entering	Food allergies & other concerns	School

Grade School Program

Date: Monday-Friday, June 17th-21st **Time:** 9am-2:30pm **Location:** PAC

***Campers will need to bring a SACK LUNCH each day!**

1st – 6th GRADE REGISTRATION

First Name	DOB (MM/DD/YYYY)	Grade Entering	Food allergies & other concerns	School

Teen Program

Date: Sunday-Thursday, June 16th-20th **Time:** 7-9pm **Location:** PMR

7th-12th GRADE REGISTRATION *Just graduated seniors are welcome too!

First Name	DOB (MM/DD/YYYY)	Grade Entering	Food allergies & other concerns	School

REMEMBER TO ALSO FILL OUT A MEDICAL RELEASE FORM FOR EACH CHILD