



South Gibson Catholic
Vacation Bible School 2023
Participant Registration Form

Date: June 26-30
Time: Monday - Thursday 8:30 am to 11:30 am
Friday - 8:30 am to 12:00 (Mass at 8:45 am-This will be an open to the public Mass)
Location: Sts. Peter & Paul Church - Haubstadt
For students entering Kindergarten through 5th grades

Cost: \$10.00/child before May 23rd, 2023 \$20.00/family before May 23rd, 2023
****Late Fee: \$12.00/child after May 23rd, 2023 \$25.00/family after May 23rd, 2023****

Want to help? Volunteer through Signup Genius

There will be daycare available for anyone who helps with VBS
Signup Genius: https://www.signupgenius.com/go/9040A4AACAD28A7FA7-vacation
email: Jason Kruger at jkruger@evdio.org

Complete and return form to the church collection, parish office or mail to:
Sts. Peter & Paul Attn: VBS, 211 N. Vine St., Haubstadt, IN 47639 by June 1.
Include payment (checks made payable to Sts. Peter & Paul Church)

Child's Information: (Please fill out form for each child attending.)

Name: Age: Parish:

Grade your child will be entering in August, 2023: K 1 2 3 4 5

Volunteers ONLY: Are you utilizing daycare? Yes No Number of children utilizing daycare

Family Information: Parents/Guardians' Name(s):

Phone Numbers: (1) (2)

Email:

Emergency Contact Other than listed above

Name: Phone:

Any food allergies? If so, What?

Any medical conditions/special needs? If so, what?

I understand that reasonable precautions will be taken to safeguard the health and well-being of the participants in this VBS and that I will be notified as soon as possible in the event of an emergency. In the case of sickness or an accident, I authorize and consent the VBS Team, or other associated volunteers of the VBS program to obtain medical care from a licensed physician, hospital, or medical clinic for my son/daughter in the event that myself or other legal guardian(s) cannot be reached. I hereby do release and forever discharge this Diocese, Parish and/or Organization from all manners of actions, claims which I or the child named above shall or may have for any reason, arising during my child's attendance of the VBS.

Unless other written instruction is submitted, I also consent to allowing my child's image to be recorded, either by photograph or video, and used during the VBS week or for future advertisement of Parish VBS programs. Any other use will require your further consent.

Parent / Guardian Signature

Date

