



Vacation Bible School Student *Volunteer** Registration

Held June 10—14

Each day will begin at 8:30 a.m. and will conclude at Noon.

If interested in volunteering your time and talents, complete this form, have your parent sign it and return to the parish office.

You will be advised of your Vacation Bible School assignment a few weeks prior to the start of the program.

Crew Leaders MUST be available all day, each day.
Forms must be returned by *May 17* in order to receive a t-shirt.

Name _____ Phone: _____

Grade Entering _____ Shirt Size: YM YL AS AM AL AXL

Allergies/Medical Considerations: _____

In the event of an emergency please contact:

Name: _____ Relation: _____ Phone: _____

Emergency Medical Treatment: In the event of an emergency, I hereby give permission to transport my child to a hospital for emergency medical or surgical treatment. I wish to be advised prior to any further treatment by the hospital or doctor.

Signed: _____ Parent's Name: _____

Parent's Phone: _____ Parent's Email: _____

_____ I prefer for my child(ren's) pictures ***not*** to be used in Social Media

Please indicate your 1st, 2nd, and 3rd choice (Mark with a 1, 2 and 3)

Drama _____ Music _____ Imagination Station _____ Nursery _____ Teacher Helper, Pre-K and K _____

Games _____ (Grades 7 and up only) Crew Leader _____ (Grades 8 and up only)

Crew Leader Assistant _____ (Grades 6 and up)

_____ In addition to my choices above I would like to help with Set Design, June 3—7 (Grade 7 and up only)

_____ I can't help with week of June 10—14 but CAN help with Set Design, June 3—7 (Grade 7 and up only)