


VBS 2019 St Boniface Informational Flyer
VACATION BIBLE SCHOOL


 **Who is this for?** Entering into Grades K-5 (sorry no pre-school)

This year children will be learning to recognize Jesus in all those they meet and everywhere they go by learning the words of Jesus, as shared by Mark, Luke and John. In our bible station, children will learn the scriptures, stories and activities. Songs and movements (new as well as well some familiar songs) will connect with the daily scripture, helping them recall and retains Jesus's words. Crafts and Games will unleash the "creative" side "of learning and allows us to help them further connect with Jesus. During mass, T & Th, children will have an opportunity to hear Father Jeff&/or Father Rob speak about Jesus too. Lots of fun to be had at this year's 2019 VBS. We hope your child or children will join us for this uplifting spiritual adventure.

Daily snacks are provided. *(please let us know if your child has any food allergies, or other allergies)*

 **When?** Monday-Friday, July 15-19,

 **Time:** 8:00-Noon

 **Where:** St Boniface, lower level of church

 **Check in;**

- **M, W, F; between 8:00 -8:20**, a.m., lower level of church, oak room
- **T & Th; between 745-755**, church lobby (**these are our Mass days, mass starts at 8 a.m.**)
- *PARENTS; sign your name, time and check mark by child(rens) name, to verify your child is in attendance; Also, please let us know, if you are having your someone else pick up your child and name*

 **Pick up**

- **M- Th; between 11:40-Noon**
- **Friday; please arrive by 1130.** The children have worked hard all week and will gladly want to show you what they have learned.
- *PARENTS, at time of pick up sign your name and time to verify that you have picked them up. Also be sure to take home their craft for the day*

COST: \$20.00 PER CHILD. This covers the cost of the daily snacks, daily crafts, folders, handouts

If you want to register multiple children and this cost is a hardship, contact Benna Denu at the parish office. We want every child to have the opportunity to attend. Your privacy will be respected and remain confidential

PRE-REGISTRATION; *is appreciated and encouraged, for planning, thank you.*

- ❖ **Anytime in June, or July up to and including Friday July 12**
- ❖ Remember the office closes at noon or Fridays.
- ❖ Complete one registration form for each child that will be attending
- ❖ Forms are available in the parish office, or, contact Cheryl Green by email for a form
- ❖ Return the form(s) and the payment **to the parish office.**
- ❖ Make the check out to St. Boniface, in notation area write "VBS":

WHAT IF I MISS THE PRE-REGISTRATION DATE CAN, I STILL BRING MY CHILD (CHILDREN)?

YES: But, call or email Cheryl Green by Saturday July 13th. We want to assure we have enough crafts and snacks for your child(children) *Let her know the names, grade level, ages and allergies of the children you plan to register. Then, on Monday July 15th, bring the form and check (made to St. Boniface, notation: VBS*

Question? Contact Cheryl Green: Home: 618-692-0788, Email cheryl.green@swic.edu

IF YOU HAVE MORE THAN ON CHILD ATTENDING VBS, PLEASE COMPLETE A FORM FOR EACH CHILD.

STUDENT _____ **GRADE ENTERING** _____ **Gender:** M F

PARISH: (circle one) St. Boniface; Yes, _____ Other? _____

If other, write in the Parish Name: _____

PARENT/GUARDIAN INFORMATION (if address is the same, write in "same")

Name of **Father/ or Guardian** _____

Address _____ City _____

Home Phone _____ Cell phone _____

Name of **Mother /or Guardian** _____

Address _____ City _____

Home Phone _____ / Cell phone _____

MEDICAL: Allergies, special needs

Please explain any medical or physical problems including all allergies which we should be aware of; or any special needs/circumstances that may relate to your child:

EMERGENCY CONTACTS

1 Name _____
Relationship _____ Contact number _____

2 Name _____
Relationship _____ Contact number _____

MEDICAL RELEASE

In case of emergency and a parent or emergency contact cannot be reached by phone, I authorize any teacher/sponsor to obtain medical treatment for my child (children) name(s) _____

I understand that as the parent/guardian I am responsible for medical expenses incurred.

Parent/Guardian Signature _____ **Date** _____

PHOTOGRAPH RELEASE

During Vacation Bible School we will have the opportunity to take photos of children engaged in activities. We need your permission to use photos of your child on the St. Boniface Parish Web Site and in other communications such as, but not limited to; Parish publications (e.g., bulletins, brochures), print advertising and media relations. Your child's name will not be used.

Yes, I GIVE MY PERMISSION for St. Boniface Parish Vacation Bible School to use photographs of my child/ children(names) _____ to illustrate activities of the program such as, but not limited to: Parish publications (e.g. bulletins, brochures), St. Boniface Parish Web site, print advertising and media relations that promote the program.

Parent/Guardian Signature _____ **Date** _____

No, I DO NOT GIVE MY PERMISSION for St. Boniface Parish Vacation Bible School to use photographs of my child /children(names) _____ to illustrate activities of the program such as, but not limited to: Parish publications (e.g. bulletins, brochures), St. Boniface Parish Web site, print advertising and media relations that promote the program.

Signature _____ **Date** _____