



St. Catherine Parish
Parroquia de Santa Catalina

Join Us for Vacation Bible Camp Summer 2017!



Half Day Camp (2 Sessions)
Session I - June 12-16, 2017
Session II - June 19-23, 2017
9:00 am—12:00 noon

For all children ages 4-11
(entering PK - grade 5 in Fall 2017)

Cost: \$50 per child / \$40 each additional child in the family.
Children of full week volunteers register for FREE!

Registration Opens Monday, February 27th.
Registration Deadline: May 1st or until filled.

Registration forms are available online, at the Rectory or the Family Faith Formation Office.
For further information or to volunteer, please contact:
Dianna Lopez at (408) 779-9604 or by e-mail: dlopez@dsj.org

REGISTRATION AND RELEASE FORM—VBC Summer 2017

Name of Child: _____ Grade in Fall 2017: _____ Age: _____

Parent/Guardian Name: _____

Address: _____ City: _____

Home #: _____ E-mail address: _____

Mother Cell #: _____ Father Cell #: _____

Favorite Snack: _____ Favorite Fruit: _____

_____ I am available to volunteer for VBC. Please contact me!

Please circle T-shirt size: Child S M L XL Adult M L XL

Does your child have a medical condition or food allergy? Y N

If yes, please explain: _____

Doctor's Name: _____ Doctor's Phone #: _____

Insurance Company: _____ Policy #: _____

Emergency Contact Person (in the event the parent(s) cannot be notified)

Name: _____ Relation: _____ Phone #: _____

I understand that reasonable precautions will be taken to safeguard the health and well-being of my child, and that I will be notified as soon as possible in the event of an emergency. In case of sickness or accident, I authorize and consent to any x-ray exam, anesthetic, medical, dental or treatment and hospital care to be rendered to my child under the general care and advice of any physician, dentist, or surgeon licensed to practice in any state. I further understand and agree to be responsible for any such medical, dental and/or hospital expenses incurred.

By signing this form, I hereby grant permission for my child to be photographed and/or videotaped during Vacation Bible Camp (VBC) at St. Catherine Church. I understand that my child may decline to be photographed and/or videotaped at any time. I further grant permission for the resulting photographs and/or videotape footage to be edited, if necessary, and then published and/or broadcast for the purpose of promoting VBC. **Please print "Photo Opt Out" by the signature if you do not want this permission granted.**

Parent Signature: _____ Date: _____

FOR OFFICE USE: Payment Enclosed: \$ _____ CASH enclosed? yes/no Check # _____