



Vacation Bible Camp 2019

ATHENS: St. Paul's Dangerous Journey to tell the Truth

KEEP THIS PAGE!

Who Preschool (3 years old) through entering Grade 5
Adult catechists and teen volunteers
Where St. Brendan Parish
When July 8-12, 2019 (Tuesday through Friday)
9:00 am – 12:30 pm
Friday, a little later for Family Gathering in the Narthex

The Family Gathering gives parents a chance to join in a brief final recap of our week.

Vacation Bible Camp is a wonderful opportunity for children to explore our Catholic faith in a scripture based summer program. Stories, games, prayer, music and crafts are all part of the plan. Parent volunteers are essential. Call Andrea King 425-205-2648.

Cost: \$55 per child or \$110 maximum per family
EACH DAY PLEASE BRING A CAN OR JAR OF FOOD FOR HUNGRY FAMILIES IN OUR AREA.

RAINBOW Age 3-5

MEGALOPOLI (means CITY) Entering 1st – 5th

HELPERS Entering 6th & older

Drop-Off & Pick-Up Every day, check -in begins at 9:00 outside the church. Opening Assembly inside the Narthex begins promptly at 9:40. ***Each child is signed in by the parent who will pick them up at 12:30. If a different adult is picking up the child, this arrangement MUST be made in writing in advance.*** (Note to parents: your children are visiting **ATHENS**, coming from other cities (megaloupoli) in the Mediterranean region.

DO NOT LEAVE YOUR CHILD UNATTENDED!

Please **send a bottle of water** to Vacation Bible School each day, placed in a bag marked with your child's name.

Attire: This is CAMP. Send your child dressed for "messy play!"

Register as soon as possible (to help with planning).

We are hoping for 100 elementary age children and 40 preschoolers.

Questions? Contact Andrea King 425-205-2648 andreak@saintbrendan.org

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REGISTRATION FORM—*DETACH AND SUBMIT*

Make check payable to St. Brendan Parish, (note VBS)
Return to St. Brendan Parish Ministry Center, attn: Andrea King, 10051 NE 195th ST, Bothell, WA 98011

Parent(s)/Guardian(s) Name _____

Telephone & Email _____

Child's Name	Age/Birth Date	Grade next Fall	Health Concerns/Restrictions/Medications

_____ I would like to volunteer (see volunteer signup sheet).

_____ In order to volunteer I will need childcare for my child younger than 3.

Names and ages of volunteer's children below age 3 who need childcare

Emergency Contacts

Parent(s)/Guardian: _____ Phone # _____

Other Contact: _____ Phone # _____

Child's Physician: _____ Phone # _____

I give permission for my child(ren) to participate in St. Brendan Vacation Bible School from July 8-12 at St. Brendan Parish. I understand that this event will be supervised by designated adult parish employees and volunteers. I also give consent for emergency medical treatment if necessary. I request that, if possible, I be contacted prior to treatment at the above phone numbers.

Parent/Guardian Signature _____ Date _____

_____ By initialing, I give permission for my child/children's pictures/video to be taken for parish use for future Vacation Bible School promotion material only.

_____ Please do not take pictures/video of my child(ren).