

PARISH OF THE HOLY SPIRIT PRESENTS:

“ROAR!” – JUNE 24-28, 2019



Welcome to **ROAR!** Totally Catholic VBS, where kids discover that even though life gets wild, *God is good!* **ROAR!** is filled with incredible Bible-learning experiences kids see, hear, touch, and even taste! *Sciency-Fun Gizmos™*, team-building games, cool Bible songs, and tasty treats are just a few of the standout activities that help faith flow into real life. (Since everything is hands-on, kids might get a little messy. Be sure to send them in play clothes and safe shoes.) Plus, we'll help kids discover how to see evidence of God in everyday life—something we call God Sightings®. Get ready to hear that phrase a lot!

Pre-schoolers will gather at Little Paws Preschool (PCC Rm 6/8), and elementary children will be in mixed-age groups with other children who have finished kindergarten through grade 5. These small groups, called Crews, are led by adults and teens who love working with children and helping them grow in faith. Your child(ren) will have many wonderful opportunities to make new friends, and interact with other children in his/her Crew.

Parents, grandparents, and friends are invited to join us each day at 11:35 am for Safari Celebration, a daily exploration of our God's goodness!

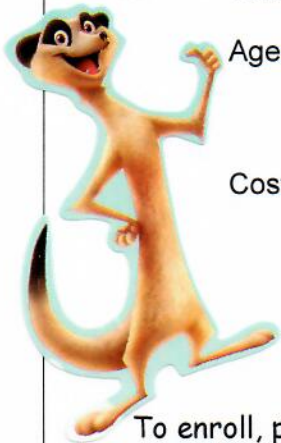
Dates: Monday, June 24 through Friday, June 28, 2019

Time: 9:00 am to noon

Ages: Pre-school ages 4 and 5 (by June 1st and **must** be potty trained) through 5th grade during the 2018/2019 school year (please register your child(ren) for the grade level just completed)

Cost: Registered Holy Spirit and Elem RE families: \$25 per child or \$60 for 3 or more children. All other families: \$30 per child or \$75 maximum for 3 or more children in the same family.

Plus one white or light colored T-shirt (pre-washed) per child to be brought the first day **AND** either one dozen cookies per family OR supply specific snack item for themed treats (will be called with item)



To enroll, please bring or mail the registration form and payment in an envelope marked "ROAR!" to Parish of the Holy Spirit, 7409 W. Clearwater Avenue, Kennewick, WA 99336, by **JUNE 14, 2019.**

Due to facilities, pre-school registration will be limited. Children will be enrolled on a first come, first serve basis. Register early to avoid disappointment!

REMINDER: For safety reasons, please walk your child(ren) into the building to the assigned meeting place: the hall in the parish community center (PCC) for elementary children, and PCC classroom 6 for Pre-school.

QUESTIONS? Call Pat at 735-8558 (church)



at Parish of the Holy Spirit, June 24-28, 2019

Name of Parent(s) _____ Home phone: _____

Address: _____ Cell phone: _____

_____ Work phone: _____

Parish or home church: _____

Person responsible for drop-off/pick-up, if other than parent(s):
_____ Phone: _____

PRE-SCHOOL REGISTRATION (MUST be 4 or 5 years old by June 1, 2019)

Child's name: _____ Birthdate: _____
First Last

Child's name: _____ Birthdate: _____
First Last

ELEMENTARY REGISTRATION (List grade [K-5] during 2018-2019 school year)

Child's name: _____ Grade past year: _____
First Last

Child's name: _____ Grade past year: _____
First Last

Child's name: _____ Grade past year: _____
First Last

Vacation Bible School (and events like it) can only happen with the help of loving volunteers. VBS offers parents a wonderful opportunity to show their children by example how important it is to be involved in their activities, and affords the occasion to continue the conversation about what their children experienced. Even if you can't help every day, we invite you to volunteer at least one day.

I/we would be willing to help: ___ Crew Leader ___ pre-school ___ kitchen
___ registration ___ decorations ___ photography ___ childcare ___ where needed
Available: ___ Monday-Friday ___ Mon ___ Tues ___ Wed ___ Thur ___ Fri

We will provide: ___ one dozen cookies per family
OR ___ supply specific snack item for themed treats (will be called with item)

Cost is: **Registered Holy Spirit and Elem RE families:** \$25 per child or \$60 maximum for 3 or more children. **All other families:** \$30 per child or \$75 maximum for 3 or more children in the same family.



IF this form was completed for the 2018-2019 Religious Ed year, you do NOT need to complete a new one. If, however, there is not one on file for each child being registered, please complete as needed. Extra forms are available at the Parish office, or the form may be duplicated.

**PARENTAL/GUARDIAN MANDATORY HEALTH FORM AND LIABILITY WAIVER
Diocese of Yakima and the Parish of the Holy Spirit**

Please print

Name of Student _____ Date of Birth _____ Grade _____ Sex _____

Address _____
Street City State Zip Phone _____

EMERGENCY CONTACT PERSON:

Parent/Guardian Name _____ Home Phone _____

Work phone _____ Cell phone _____ Work Phone _____ Cell phone _____

Address (if different from student) _____

ALTERNATE CONTACT PERSON: (use someone near the primary contact)

Name _____ Relationship to student _____

Address _____
Street City State Zip

Home Phone _____ Work Phone _____ Cell _____

I, _____, permit _____ to take part in classes, field trips,
Print parent/guardian name Print student name

youth activities, and other activities sponsored by the Parish of the Holy Spirit, Kennewick, WA, whether said function is held in the city of Kennewick or out of town. As parent and/or legal guardian, I remain legally responsible for any personal actions taken by the above named minor student. I agree on behalf of myself, my child named herein, or our heirs, successors, and assigns, to hold harmless and defend the Parish of the Holy Spirit, its teachers, its officers, directors & agents, and the Diocese of Yakima, chaperones or representatives associated with any of the above mentioned activities, arising from or in connection with my child attending the activity or in connection with any illness or injury or cost of medical treatment in connection therewith, and I agree to compensate the parish, its officers, directors and agents, and the Diocese of Yakima, chaperones, or representatives associated with the activity for reasonable attorney's fees and expenses arising in connection therewith. I give permission to use photos or videos of my child taken during program activities for future program promotion purposes.

Signature of parent/guardian _____ **Date** _____

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. In the event of an emergency, if you are unable to reach me at the above numbers, contact the "Alternate Contact Person" I have listed above.

Signature of parent/guardian _____ **Date** _____

Insurance information: Family Physician name and phone _____

Family Health Plan Carrier _____ Policy Number _____

Specific Medical Information: The parish will take reasonable care to see that the following information will be held in confidence.

Medications presently taking: _____

Date of last tetanus/diphtheria immunization: _____

Allergic reactions (medications, foods, plants, insects, etc.): _____

Any physical limitations _____

Other information regarding you child's physical, medical, or emotional well-being which will help us to best meet his/her needs: _____