

**HOLY TRINITY PARISH VACATION BIBLE SCHOOL REGISTRATION**  
**8/19/24 - 8/23/24 from 7:45am - 3:00pm**

**Pope Francis Hall @ 11 School Street, Plymouth, NH 03264**

Parent/Guardian Name \_\_\_\_\_

Mailing Address \_\_\_\_\_ Town/Zip \_\_\_\_\_

Primary Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Email \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Cell Phone # \_\_\_\_\_

<b>Children Attending VBS - \$25.00 each</b>				<b>PLEASE CHECK SACRAMENT(S) RECEIVED (if applicable)</b>			
<i>First name and Nickname, (if applicable)</i>	<b>Date of Birth (mm/dd/yr)</b>	<b>M/F</b>	<b>Grade/ Age Aug 2024</b>	<b>Baptism</b>	<b>Reconciliation (Confession)</b>	<b>Confirmation</b>	<b>Eucharist</b>

Please list any special circumstances which the catechists should know about your child (ex. EpiPen, inhalers, medical conditions, behavioral issues, etc.)

We occasionally display photos of the children on the parish website, bulletin, and Facebook page. **If you do not want your child/ren’s photo displayed, please check the following: \_\_\_\_\_ I do not want my child/ren's photo displayed.**

I understand that reasonable precautions will be taken to safeguard the health and well-being of the participants in this VBS and that I will be notified as soon as possible in the event of an emergency. In the case of sickness or an accident, I authorize and consent the VBS Team, or other associated volunteers of the VBS program to obtain medical care from a licensed physician, hospital, or medical clinic for my son/daughter in the event that I or other legal guardian(s) cannot be reached. I hereby do release and forever discharge Cat.Chat Productions, this Diocese, and Parish from all manners of actions, claims which I or the child/ren named above shall or may have for any reason, arising during my child/ren's attendance of the VBS.

*My signature indicates that I have read the information and given accurate responses.*

X \_\_\_\_\_  
 (Signature of Parent or Guardian)

**Registration forms can be mailed to: Holy Trinity Parish, 11 School St., Plymouth, NH 03264 Attn: VBS and Faith Formation Coordinator or emailed to [faithformation@holytrinityparishnh.org](mailto:faithformation@holytrinityparishnh.org)**

**For more information please contact: Holy Trinity Parish Faith Formation Coordinator: Kristen Downing de Almeida at [faithformation@holytrinityparishnh.org](mailto:faithformation@holytrinityparishnh.org) or 603-490-8555**