



St. Columbkille Vacation Bible School

August 1-5, 2011 from 9:00 AM – 12:00 PM
For children in Grades Kindergarten – 6th

Family Name: _____

Father's Name _____ Mother's Name _____

Address _____

Home Phone _____ Cell Phone _____

Emergency contact _____ Phone _____

Please list names of all adults who are permitted to pick up your child (ren):

Child's Name: _____ Age: _____ Grade as of Sep.' 11 _____

Allergies or other medical conditions _____

Are there any custody issues about which St. Columbkille personnel should know regarding your child? yes no If yes, please specify: _____

Child's T Shirt Size: (Please circle) Child S M L XL Adult S M L XL

Cost for each T-Shirt is \$5. Please send this fee in on the first day or include with registration.

Will your family attend the St. Columbkille Vacation Bible School Show and Family Lunch on Friday, August 5, 2011 starting at 11:00 AM? yes no

If yes, how many family members (children, parents, grandparents, etc.) will be attending including your VBS child. _____

(If more than one child is attending, VBS, please only answer the lunch question on one form)

Parent/Guardian Signature: _____ Date: _____



The completed registration form can be put in the collection basket, mailed, or dropped off at the Religious Education Office by July 18, 2011.

Please consider sending in a "free will donation" to help cover VBS expenses. Put it in an envelope marked "donation" with your child's name on it. Thank You!

**St. Columbkille Vacation Bible School 2011
Donation and Volunteer Form**

How would you like to help?

To work with St. Columbkille Children you must: have attended the Protecting God's Children Workshop; secured PA 33 and 34 Clearances; registered on the Diocese of Pittsburgh database (diopitt.org); signed Cardinal Clause and Pastoral Code of Conduct forms. For more information, contact Dr. Josie Kocian Crame, DRE at 724.695.2146.

Name: _____ Phone: _____

E-mail: _____

I am interested in helping in the following way(s): *Please check all that are applicable.*
Thanks.

Help with Setup and Planning

___ Decorating ___ Build Props ___ Make Craft Kits ___ Other _____

Help with Program August 1-5, 2011

___ Center Directors – *Must be available all week*

Select Area: ___ Skits ___ Bible Stories ___ Crafts ___ Lead Music ___ Lead Games

___ Counselors or Group Leaders (High School Students & Adults) *Must be available all week*

Select Age Group ___ Kindergarten ___ 1 & 2 grades ___ 3 & 4 grades ___ 5 & 6
Grades

___ Help in another way (*specify*) _____

Available only on certain days *Please check day(s) available*

___ August 1 ___ August 2 ___ August 3 ___ August 4 ___ August 5

How would you like to help? _____

___ I will help on August 5 with the family lunch

Donations Needed

I will donate the following item(s). (*You will be contacted regarding when needed & the quantity needed.*)

- ___ Baby wipes
- ___ Boxed drinks
- ___ Cream
- ___ Empty coffee cans
- ___ Hand Sanitizer
- ___ Hot dog buns
- ___ Hot dogs
- ___ Pasta Salad
- ___ Milk in gallons
- ___ Paper cups
- ___ Paper napkins

- ___ Paper plates
- ___ Plastic forks, spoons,
knives
- ___ Plastic ziplock bags
(large & small)
- ___ Potato salad
- ___ Potato chips
- ___ Pretzel sticks
- ___ Rock Salt
- ___ Tossed Salad
- ___ Sugar (5 lb. bag)

- ___ Tissues
- ___ Pudding Cups
- ___ Assorted Fresh Fruit
- ___ Grapes
- ___ Watermelon
- ___ Apples
- ___ Cookies
- ___ Crackers
- ___ Cheese Cubes
- ___ Apple Juice
- ___ Dinner Rolls

