"<u>Join in the Joy"</u> ...Where Jesus Walked...



August 13-17th

9:00 AM – 12 Noon

Closing Celebration 7:00 PM Friday

A program for children: 5-11 year olds (pre-K - going into 6th)

> <u>Registration:</u> Registration is \$50 per child.

<u>Mail or drop off form to:</u> Sacred Heart Church of OB 4776 Saratoga Ave. San Diego, CA 92107

Please make checks payable to: Sacred Heart Church of OB

Questions: Therese: <u>tireneflan@yahoo.com</u> or 619-886-8337

"Join in the Joy Registration Form

Complete and return by July 31st Please complete the family information and complete the <u>Child's Information Section</u> for each child participating.

FAMILY INFORMATION:

Parent (Guardian's) Names
Street Address
City & Zip
Home Phone
Mom's Cell phone
Dad's Cell phone
Email

In the event of an emergency, if you are unable to reach me, please contact the following:

Name _	phone
Doctor	Phone

Restrictions on who picks up my/our child/children:

PERMISSION SLIP FOR EMERGENCY MEDICAL TREATMENT

I give permission for the volunteers of Sacred Heart of OB Fun & Faith to obtain emergency medical treatment for my child/children. This release is effective August 13-17, 2018

Child's/Children's Names:

Signature of Parent/Guardian

Date

Register Early & fill out the reverse side too!

PLEASE READ: The information you provide about each Child will ensure their health, safety and welfare at Fun & Faith. Please answer the questions below and provide us with needed information so your child can have the best possible experience at Fun & Faith.

First Child's Information:

 Child's Name
 M_ F_

 Grade
 Birth Date
 Health Problems/Allergies (including food & insect allergies & their Reactions): _____

If your child has severe food allergies please provide their snack each day.

Any activities your child CANNOT participate in _____

\$50. Enclosed

Second Child's Information:

 Child's Name
 M_ F_

 Grade
 Birth Date

Health Problems/Allergies (including food & insect allergies & their Reactions): _____

If your child has severe food allergies please provide their snack each dav.

Any activities your child CANNOT participate in _____

\$5. Enclosed

Copy and complete more if needed. Thank you. Fun & Faith Team

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Fun & Faith VBS

Sacred Heart 2018

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