

St. Joseph the Worker Bible Camp 2019

June 24th – 28th 9am - 12noon

Entering K - 6th Grade

CHILD'S NAME	AGE	GRADE ENTERING	LIST ALLERGIES
1. _____			
2. _____			
3. _____			
4. _____			

Registration Fee is \$10.00 per child (\$15 after June 15). Price includes a Bible Camp shirt, snack and materials.

Please circle t-shirt size:

Youth Small	Youth Medium	Youth Large			
Adult Small	Adult Medium	Adult Large	XL	XXL	

CONSENT FORM & LIABILITY WAIVER

*I, _____ grant permission for my child/children listed above to participate in SJW Summer Bible Camp. This activity will take place under the guidance and direction of parish employees and/or volunteers from SJW. **Mrs. Linda Gaudet is the volunteer in charge.**

*As parent and/or legal guardian, I remain legally responsible for any personal actions taken by the above named minor ("participant/s"). I agree on behalf of myself, my child/children named herein, or our heirs, successors, and assigns, to hold harmless and defend SJW, its officers, directors, employees and agents, and the Diocese of Baton Rouge, its employees and agents, chaperones, or representatives associated with the event, from any claim arising from or in connection with my child/ren attending the event or in connection with any illness or injury (including death) or cost of medical treatment in connection therewith, and I agree to compensate the parish, its officers, directors and agents, and the Diocese of Baton Rouge its employees and agents and chaperones, or representative associated with the event for reasonable attorney's fees and expenses which may incur in any action brought against them as a result of such injury or damage, unless such claim arises from the negligence of the parish or diocese.

*I hereby warrant that to the best of my knowledge, my child/ren is/are in good health, and I assume all responsibility for the health of my child/ren. 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 contact me at _____. If you are unable to contact me please contact _____@_____.

*Name & # of family Dr. _____ Family Health Plan Carrier & Policy # _____.

*Photo Release...I grant to SJW the right to take photographs of my above listed child/ren in connection with the above identified event. I authorize SJW its assignees and transferees to copyright, use and publish the same in print and/or electronically. I agree that SJW may use such photographs of above child/ren with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising and Web content.

I have read and understand all of the above:

NAME/DATE: _____

PRINTED NAME: _____

ADDRESS _____

Don't delay. Space availability depends on the number of volunteers.

Return forms/fee to SJW, P.O. Box 190, 70339 by June 14, 2019. T-shirts will be purchased by SJW and distributed the week of Bible Camp. Fees may be waived if necessary. Call the office at 252-6633.

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VOLUNTEER FORM

Please note. Everyone over 21 years of age must have Child Protection Clearance to participate. Anyone between the age of 12-20 may serve as an aide/helper providing there is a certified adult over 21 years in the room with them. Child Protection Certification is required by our diocese. There is ample time to certify before the week of bible camp if you have not previously done so. The process is simple and rather quick.

Please call the Office of Christian Formation @ 985-252-6633 for more details.

Name _____ Phone _____

*In case of emergency, give a name and number for us to contact. _____

Please state in what area you would like to work

Arts _____ Teacher _____ Refreshments _____ Skits _____

Music _____ Aide/helper _____ Traffic Monitor _____ Other _____

Please return form by May 3rd. Forms may be dropped in the collection in a marked envelope. They may also be dropped off at the Parish Office or they can be mailed to the following address.

St. Joseph the Worker
Office of Christian Formation
P. O. Box 190
Pierre Part, LA 70339

