

# VOYAGES

*Sailing God's course*

VACATION BIBLE SCHOOL & SON DAYS EXPERIENCE

9 AM TO NOON\*

MONDAY—FRIDAY, AUG. 9-13, 2010

VBS IS FOR CHILDREN PRE-K (4 YEARS OLD), KINDERGARTEN & GRADES 1, 2 AND 3

SON DAYS IS FOR CHILDREN IN GRADES 4, 5 AND 6

\*TUESDAY & THURSDAY AFTERNOON OPTIONS AVAILABLE FOR CHILDREN ENROLLED IN SON DAYS

*Cost is \$40/child*

**\$40/CHILD FEE INCLUDES VOYAGES T-SHIRT, CRAFTS, SNACKS & MORE!**

**AFTERNOON FEES FOR SON DAYS:**

TUESDAY AFTERNOON AT *FEED MY STARVING CHILDREN*: \$10/CHILD

THURSDAY AFTERNOON AT *CASCADE BAY WATER PARK*: \$25/CHILD

*Teen & Adult Cruise Team Needed!*

BOOK YOUR PASSAGE BY MONDAY, JULY 13

**Call 952.890.9434**



# VOYAGE! Sailing God's Course

FOR OFFICE USE:  
 AMOUNT PAID \$ \_\_\_\_\_ DATE: \_\_\_\_\_  
 CHECK # \_\_\_\_\_

**Registration Form for Vacation Bible School (Children Pre-K, Kindergarten, Grades 1, 2 and 3 in Fall 2010)  
 Son Days (Children entering Grades 4, 5 and 6 in Fall 2010) ~ Monday-Friday, August 9-13, 2010**

**FAMILY NAME:** \_\_\_\_\_ **PARENT(S):** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**PHONE NUMBER(S): Home:** \_\_\_\_\_ **Alternate:** \_\_\_\_\_  
 (Please include area code if different than 952)

**E-MAIL ADDRESS:** \_\_\_\_\_

CHILD'S NAME (AS IT SHOULD APPEAR ON NAME TAG)	GRADE (FALL 2010)	T-SHIRT SIZE (FOR ALL YOUTH REGISTERED)							SON DAYS OPTION		
		YS	YM	YL	AS	AM	AL	AXL	Other	Tuesday	Thursday

**VOLUNTEERS** ARE INTEGRAL TO A SUCCESSFUL VBS/SON DAYS EXPERIENCE. CHECK ANY AND ALL OF THE OPPORTUNITIES IN WHICH YOU WOULD LIKE TO VOLUNTEER DURING OUR VBS/SON DAYS WEEK. **PLEASE NOTE THAT "GROUP LEADERS"** SHOULD BE AVAILABLE TO BE WITH THEIR ASSIGNED GROUP OF CHILDREN FOR THE MAJORITY OF THE WEEK.

### VOLUNTEER OPPORTUNITY

Adult Volunteer Name(s):	DAYS AVAILABLE				
	MON	TUES	WED	TH	FRI
Circle Volunteer T-Shirt Sizes AS AM AL AXL AXXL AXXXL					
VBS Group Leader (prefer an all-week commitment)					
Son Days Group Leader (prefer an all-week commitment)					
Child Care (provide child care for volunteering adults)					
Scripture Station					
Crafts					
Games/Sports					
Permanent Substitute (on-call volunteer to cover emergencies)					
<b>TEEN VOLUNTEER (Gr.7 &amp; Up) NAME:</b>					
Circle Volunteer T-Shirt Sizes AS AM AL AXL AXXL AXXXL					
Preferred Assignments (See above listing)					
Choice #1 Assignment:					
Choice #2 Assignment:					



### VOLUNTEER CHAPERONES ALSO ARE NEEDED FOR THE SON DAYS OPTIONAL AFTERNOON

**ACTIVITIES.** If you are available to help chaperone either/both of these events, please check below:

Tuesday "service" event  Thursday "fun" event

**FEES:** \$40/child for VBS morning (9 a.m. to Noon) \$40 x \_\_\_\_\_ = \$ \_\_\_\_\_

\$40/child for Son Days morning ONLY (9a.m. to Noon) \$40 x \_\_\_\_\_ = \$ \_\_\_\_\_

\$10/child for Son Days TUESDAY service (Noon to 5 p.m.) \$10 x \_\_\_\_\_ = \$ \_\_\_\_\_

\$25/child for Son Days THURSDAY fun (Noon to 5 p.m.) \$25 x \_\_\_\_\_ = \$ \_\_\_\_\_

\*\*Son Days chaperones are not charged a fee to participate in any of the Son Days optional events; however, there is a charge (TBA) for siblings attending Cascade Bay Water Park. **Siblings may attend ONLY if their parent has offered to chaperone the event.**

**Registration Deadline is Monday, July 13, 2010**

**TOTAL FEES = \$ \_\_\_\_\_**

PLEASE TURN THE PAGE FOR SON DAYS AFTERNOON ACTIVITY PERMISSION SLIP

**St. John the Baptist Catholic Church**  
**Son Days *VOYAGES* Optional Activities 2010**  
**Parental/Guardian Consent Form and Indemnity Agreement**

**Participant Name(s):** \_\_\_\_\_

**Birth Date:** \_\_\_\_\_ **Grade:** \_\_\_\_\_ **Sex:**  **Male**  **Female**

**Parent/Guardian's Name:** \_\_\_\_\_

**Home Address:** \_\_\_\_\_ **City:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Mobile Phone:** \_\_\_\_\_

**Business Phone:** \_\_\_\_\_ **E-MAIL** \_\_\_\_\_

**Circle Event(s) that applies to your child(ren):** **(ONE FORM PER FAMILY)**

<b>Date/Type of Event:</b>	<b>Tues, Aug. 10, 2010</b>	<b>Thurs., Aug. 12, 2010</b>
<b>Destination:</b>	<b>Feed My Starving Children</b>	<b>Cascade Bay (Eagan)</b>
<b>Individual(s) In Charge:</b>	<b>Andi Little</b>	<b>Andi Little</b>
<b>Time of departure and return:</b>	<b>12 noon to 5 pm</b>	<b>12 noon to 5 pm</b>
<b>Transportation to and from event:</b>	<b>Bus</b>	<b>Bus</b>
<b>Student Cost if applicable:</b>	<b>\$ 10.00</b>	<b>\$ 25.00</b>

I, \_\_\_\_\_, grant permission for my child, \_\_\_\_\_,  
(Parent or Guardian's Name) (Child/ren's Name)

to participate in the above-named activity and I warrant that my child is in good health. In consideration of my child/ren's participation, I agree to indemnify St. John the Baptist Catholic Church and or School and the Archdiocese of St. Paul/Minneapolis from any claims or law suits brought against St. John the Baptist Catholic Church and/or School and the Archdiocese of St. Paul/Minneapolis by myself, my child/ren or others, that arises out of any behavior by my child/ren at the event/activity described above. I also agree to pay reasonable attorney's fees or expenses incurred by St. John the Baptist Catholic Church and/or School and the Archdiocese in defense of such a claim/law suit.

**Emergency Medical Treatment:** In the event of an emergency, I hereby give permission to transport my child/ren to a hospital for emergency medical treatment. I wish to be advised prior to an further treatment by a doctor or hospital. In the event of an emergency, if you are unable to reach me at the above numbers,

**contact:** \_\_\_\_\_  
(Name) (Phone)

**Optional Medical Information:**

Medication my child is taking at present: \_\_\_\_\_

Family Health Plan carrier number: \_\_\_\_\_

Family Doctor: \_\_\_\_\_ Phone: \_\_\_\_\_

As parent or guardian, I agree to all of the above-stated consideration and conditions.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

I \_\_\_\_\_ (PLEASE PRINT NAME) can Chaperone and/or Drive

I have completed St. John's Background paperwork and VIRTUS training.  
(If not, there are packets available in the Education Office; to register for VIRTUS go to:  
[www.virtus.org](http://www.virtus.org) )

**PLEASE NOTE:** If parent/participant ratios are not met, this event will be cancelled.