



“Take a Road Trip to ... Holiness!”

YOUTH VOLUNTEER FORM

Vacation Bible School - 2018

July 16th - 20th from 9:15 a.m. to 12:30 p.m.



One form per volunteer please. Please return by Friday, June 29th to:
St. Francis de Sales School or Parish Office or Rose Kuner, 5424 Arlington Rd. Clinton, OH 44216

Dear Vacation Bible School Parents and Volunteers,

We are excited to announce Vacation Bible School 2018 will take place Monday through Friday, **July 16th - 20th** and concludes with a special closing and luncheon on July 20th. Our theme this year is **“Take a Road Trip toHoliness!”**. Again we will share our enthusiasm through skits, songs, crafts, snacks, games, and more!

We are eager to start planning our adventure and need many volunteers to make this week a success. Please complete the volunteer form below and turn it in as soon as possible, but no later than JUNE 29th. Vacation Bible School promises to be a week of excitement; full of faith, fun and fellowship.

YOUTH VOLUNTEER NAME: _____ Age _____ Grade _____

EMAIL _____ PHONE _____

Please indicate your 1st, 2nd, 3rd choices below: (Must choose one from lines one or two)

1. TEACHER'S AIDE _____ (please circle grade preference) pre-K grades 1-2 grades 3-4 grade 5
2. STATION HELPER _____ SNACKS _____ GAMES (8th grade and older) _____ CRAFTS _____ NURSERY _____
3. CAMP CHOIR _____ SUNDAY SET-UP _____ FRIDAY CLEAN - UP _____ SKITS _____ DECORATIONS _____

(WE GREATLY APPRECIATE YOUR HELP IN THE AREAS OF SET-UP AND CLEAN UP.)

MEDICAL

I, _____, parent/guardian of _____, do hereby give permission to the staff of St. Francis de Sales VBS to treat as necessary any accident received on the premises. Serious treatment will be referred to:

Physician: _____ phone: _____

Dentist: _____ phone: _____

Signed by parent/guardian: _____ date: _____ Any allergies? _____

PHOTO RELEASE



We ask your permission to print, post, display or show photos taken of your child at St. Francis de Sales Parish and School activities.

_____ **I give my permission** to print, display, or show any photo taken of my child as stated above. _____ **I do NOT give my permission.**

Parent/Guardian Signature _____ Date _____

Questions/Comments? Call Joanne Reich 330-338-4810 or Colleen McVicker 330-896-7122.