

Our Lady of Hope Parish

Vacation Bible School 2024

August 5 – August 9, 9 a.m. – 12 p.m.

Application and Registration form

Deadline to apply and register: July 22

Check one or more:
Child (Grade K-5) participant
Adult Volunteer
Teen volunteer
Pre-Teen Volunteer

Your Family's Last Name:		Volunteer
Email address:		
Mom's name:		
Dad's name		
Are you registered parishioners of Our Lady of Hop	ne ?	
If not, would you like to join the parish?		
Are you (the parent) interested in volunteering to	help with VBS, for one or more days, and will	ing take the online Virtus
Training class and submit a background check auth	orization form?	
Child's Name		
Child's NameA		
Child's NameA		
Child's NameA		*Allergies:
Volunteers: Teen or Pre-Teen volunteering to	·	
Name Age	Grade going into in the fall:*Allergi	es:
*Use the back of this form to further specify aller	gies and/or special needs for each child.	
Parent or guardian please read and sign:		
I agree to speak with my child(ren) about follow those which involve safety. My child(ren) will respe themselves and others with respect. I also am awa website, but their names will not be displayed pub	ect the physical boundaries of the other child re that my child(ren) may be photographed c	ren at VBS and will treat
Parent Signature:	date	
Places analysis a shock for \$25 for one shild or \$40	total for the old formily (including to on and ad	المسموم معمل

Please enclose a check for \$25 for one child or \$40 total for whole family (including teen and adult volunteers), payable to <u>Our Lady of Hope</u>. P.O. Box 285, New Hartford, CT 06057

You will be notified by email and/or phone whether your child's application has been accepted and whether you are needed to volunteer.