St. Anthony & St. Lawrence parishes

2022 Totus Tuus Registration

A summer catechetical program for our youth

Contact person: Andrea Holtmeyer Phone: 480-4170 Email: stastlreligioused@hotmail.com

Grades K - 5 (as of this Fall) Monday-Friday, July 18-22 8 AM to 2 PM @ St. Elizabeth Community Center

Grades 6-12 (as of this Fall) Sunday-Thursday, July 17-21 7 to 9 PM @ St. Anthony Parish Hall

**Each child is asked to bring a package of snacks on Monday. Snacks will be shared throughout the week.**

Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Father’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Name Grade 2022/2023 school year

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Please list any special needs for your child/children (allergies, medical issues, learning/behavioral difficulties, etc.)

In case of accident or serious illness, I request that a team member or a volunteer contact me. If I am unable to be reached, I authorize the team or volunteers to take whatever action is deemed necessary. I also release St. Anthony & St. Lawrence parish volunteers and the Totus Tuus team of any liability while my children are attending Totus Tuus. I also give my permission for my children to be photographed and published in The Catholic Missourian or parish publications.

**Parent Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_My family would like to volunteer to help with the program in some way, please contact me.**