**Registration and Permission for Totus Tuus**

90 students are the maximum capacity so please register soon to guarantee your student(s) a spot to experience this prayerful encounter with Christ!!!

Family Last Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Street Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Primary Phone# (\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent Information:**

Mother’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Day time phone# (\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Father’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Day time phone# (\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parish Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Guardian/s Allowed to pick up child(ren): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**In case of an emergency:** Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone# (\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Totus Tuus will take place the week of July 9-14 and is open to students entering 1st-12th grade!***

***ATTENTION: Students in grades 1-6th will meet (M-F) from 9:00 a.m.-2:30 p.m. AND students in grades 7-12th will meet (Sun.-Thur.) from 7-9:00 p.m.***

***Please make carpooling arrangements to get students to and from.***

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **Child’s Name** | **Gender** | **Grade** level for Fall 2021 | **Allergies/ Medical Conditions** include ADD, ADHD, etc. Please be specific and include reactions.  *\*\*Volunteers cannot administer ANY medications\*\** | Check the box for the sacraments received.  **Baptism: Penance: Eucharist:** | | | **Totus Tuus T-Shirts**  Not available |
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**Please sign below for VIDEOTAPING, STILL PHOTOGRAPHY and CONSENT to PARTICIPATE**

Our Totus Tuus Event Needs Your Help!

There are a variety of ways that you as a parent can help:

1. Host our youth volunteers (guy/gals are separate)
2. Invite the team one night for dinner Sun.-Thurs. at 5:15
3. Provide afternoon food
4. Help during the a.m. or p.m. sessions
5. Provide some of the supplies for the daily operation

\_\_\_\_ contact me! I would like to help.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ #(\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_

This authorization form constitutes permission for my child(ren)’s participation in the videotaping and/or photographs which may be taken during the program. They may be used for future promotional efforts, including Diocese of Joliet Publications, social media and our parish Website. \_\_ Yes \_\_ No

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

Parent Signature Date

**Parental consent for child(ren) to participate in Totus Tuus program:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

Parent Signature Date