



CATCHAT.CA

- AGES:** Incoming Kindergarten - 11 years old
- WHERE:** St. Peter the Apostle, 551 N Rush Street, Itasca
- WHEN:** June 16-20
- COST:** \$45 per child
- CONTACT:** Toni Pietrowski - 630-773-1272 (ext 216) / [toni@stpeteritasca.com](mailto:toni@stpeteritasca.com)
- REGISTER BEFORE:** June 1, 2025 - to be guaranteed a t-shirt

**COME TO VBS AND WALK WITH JESUS THROUGH THE CHURCH YEAR.  
JOURNEY THROUGH ADVENT, CHRISTMAS, ORDINARY TIME, LENT, AND EASTER.**



# Child Registration Form

Dates / Location: Monday, June 16 - Friday, June 20, 2025 / St. Peter the Apostle, Itasca

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## Child's Information:

Name: \_\_\_\_\_

Gender:  M  F                      Age: \_\_\_\_\_                      Grade completed: \_\_\_\_\_

T-shirt size (check one) - CHILD sizes:  XS  S  M  L / ADULT sizes:  S  M  L  XL

Allergies or medical conditions: \_\_\_\_\_

Health Insurance # (if applicable): \_\_\_\_\_

## Family Information:

Parent/Guardian Name: \_\_\_\_\_

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

Email: \_\_\_\_\_

## Phone Numbers:

Home: \_\_\_\_\_                      Cell: \_\_\_\_\_

## Emergency Contact:

Name: \_\_\_\_\_                      Phone: \_\_\_\_\_

I understand that reasonable precautions will be taken to safeguard the health and well-being of the participants in this VBS and that I will be notified as soon as possible in the event of an emergency. In the case of sickness or an accident, I authorize and consent the VBS Team, or other associated volunteers of the VBS program to obtain medical care from a licensed physician, hospital, or medical clinic for my son/daughter in the event that I or other legal guardian(s) cannot be reached. I hereby do release and forever discharge this diocese, parish, and Cat.Chat Productions Inc., from all manners of actions, claims which I or the child named above shall or may have for any reason, arising during my child's attendance of the VBS.

Unless other written instruction is submitted, I also consent to allowing my child's image to be recorded, either by photograph or video, and used during the VBS week or for future advertisement of VBS programs. Any other use will require your further consent.

Parent / Guardian Signature

Date



Scan the QR code to pay online via GiveCentral or submit payment by cash or check with form

**Return completed Registration form by June 1, 2025**  
*(t-shirts cannot be guaranteed past this date)*