

TOTUS TUUS



(Latin for Totally Yours)

June 10-14, AD 2019

9:00 AM – 2:30 PM

St. Mary's is happy to welcome back Totus Tuus missionaries to offer its summer catechetical program for children 1st – 6th grade. Mark your calendar! The camp will be held June 10th – 14th

How can you help or get involved? How you can help:

1. **Save the Date!** June 10th - 14th for grades 1st - 6th. Registration forms are on the parish website and in the parish office.
2. **Prayers** for a successful program, the missionaries, the volunteers, and the participants.
3. **Families to host the college-age missionaries.** We need two homes, one to house 2 young women and one to house 2 young men.
4. **Families (or parish groups) to host the missionaries for supper.** Parish groups, couples, or families – anyone is welcome to feed our missionaries!
5. **Helpers during the week.** We need helpers to assist the volunteers in the activities, kitchen help (snack & lunch), adult helpers for a kindergarten program, and other help. Teens and adults welcome.
6. **EVERYONE in the parish** is invited to a pot-luck which will be on Wednesday June 12th. Plan to come to meet the missionaries and to enjoy fellowship with all.
7. **Snacks.** Donation of snacks such as pretzels, cookies, crackers, goldfish, etc. (please mark donated items Totus Tuus.) Financial support is welcome as well.

CONTACT Mary Ellen Jackson

mjackson@charlestdiocese.org or 803-617-8282

if you would like to help out with any of these needs

St. Mary's Camp Catholic 2019

June 10-14

9:00 AM – 2:30 PM

Elementary Program (for children entering Grades 1-6)

Registration Fee is \$30.00 per child

Registration deadline is Wednesday, May 22

Please fill out a registration form for EACH child.

Child's Name _____

Male___ Female___ Age___ Grade entering Sept. 2019 _____

Parent's Name: _____

Phone# _____ (in case of emergency)

Email address: _____

I/We would be willing to help with Catholic Camp 2019 Yes Not at this time

Please list any **allergies or special needs** your child has that we should be aware of:

In the event of an emergency, we will contact the parent/guardian first. Please indicate an emergency contact in the event we are unable to reach you. Name _____ Phone: _____

Emergency Medical Treatment: in the event of an emergency, I hereby give permission to transport my child to a hospital for emergency medical treatment. I wish to be advised prior to any further treatment by the hospital and doctor.

Other medical treatment: in the event my child(ren) become(s) ill with symptoms such as headache, vomiting, sore throat, fever, prescription, may be administered to my child(ren) unless the situation is life-threatening and emergency treatment is required.

Photograph Release: I hereby authorize and consent to St. Mary's Church to publish all photographs, videos and voice recordings in which my child(ren) appear while enrolled as participant(s) in Christians Formation classes.

Visit Church: I hereby authorize and consent my child(ren) to walk from St. Mary School grounds to the Church with Camp Catholic personnel during Camp Catholic.

Parent/Guardian Signature _____ Date _____

Please return form and check (payable to St. Mary Help of Christians) to:

St. Mary Help of Christians Church

Attn: Mary Ellen Jackson

P.O. Box 438

Aiken, SC 29802

or put in the collection basket

For office use only Paid: Check# _____ Amount _____

ST. MARY HELP OF CHRISTIANS CATHOLIC CHURCH

Totus Tuus Week

June 10-14, AD 2019

8:30 AM - 2:45 PM

VOLUNTEER REGISTRATION FORM AND LIABILITY WAIVER

Volunteer Name: _____

Age _____ Going to a Grade _____

Family Email: _____

Parent Contact: _____

Parent Phone: _____

Emergency Contact: _____

Phone: _____

Family Doctor: _____

Phone: _____

Family Health Plan: _____ Policy # _____

Allergies/Limitations _____

OVER 18 and **VIRTUS** trained: _____ YES

Emergency Medical Treatment : in the event of an emergency, I hereby give permission for transport to a hospital for emergency medical treatment. I agree that in case of injury I will apply my insurance toward expenses incurred.

Photograph Release: I hereby authorize and consent to St. Mary's Church to publish all photographs, videos and voice recordings in which I may appear while enrolled as a volunteer in Camp Catholic.

Confidentiality: Volunteers are bound by confidentiality norms. In the course of their ministry, they may learn confidential information about children or other volunteer personnel. They are expected to keep this information confidential in any setting inside and outside the program.

SIGNATURE: _____ **DATE** _____