

# TOTUS TUUS



(Latin for Totally Yours)

July 25-30, AD 2021

St. Mary's is excited to welcome back Totus Tuus missionaries this summer.

**Mark your calendar!** July 25 – 30 for grades 1<sup>st</sup> - 12<sup>th</sup>.

Registration forms are on the parish website and in the parish office.

(different registrations for 1<sup>st</sup> – 6<sup>th</sup> and 7<sup>th</sup> – 12<sup>th</sup>)

*We need your help! -- How can you help or get involved?*

1. **Prayers** for a successful program, the missionaries, the volunteers, and the participants.
2. **Families to host the college-age missionaries.** We need two homes: one to house 2 young women & one to house 2 young men.
3. **Families (or parish groups) to host the missionaries for supper.** Parish groups, couples, or families – anyone is welcome to feed our missionaries!
4. **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.
5. **EVERYONE in the parish** is invited join us for Mass during the week (check the bulletin for time). You are also invited to a pot-luck which will be on Wednesday July 28<sup>th</sup>. Plan to come to meet the missionaries and to enjoy fellowship with all.
6. **Snacks.** Donation of snacks such as pretzels, cookies, crackers, goldfish, etc. (please mark donated items Totus Tuus.) You can leave them in the narthex or take them to the parish office. Financial support is welcome as well.

CONTACT Mary Ellen Jackson

[mjackson@charlestdiocese.org](mailto:mjackson@charlestdiocese.org) or 803-617-8282

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

**St. Mary's Totus Tuus 2021**

**July 26-30 Monday – Friday**

**9:00 AM – 2:30 PM**

Elementary Program (for children entering Grades 1<sup>st</sup> -6<sup>th</sup>)

**Registration Fee is \$30.00 per child**

**Registration deadline is Wednesday, July 21**

Please fill out a registration form for EACH child.

Child's Name \_\_\_\_\_ Grade entering Sept. 2021 \_\_\_\_\_

Male \_\_\_ Female \_\_\_ Age \_\_\_\_\_ Has child received First Communion? YES NO

Parent's Name: \_\_\_\_\_

Phone# \_\_\_\_\_ (in case of emergency)

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

I (the parent) would be willing to help with Catholic Camp 2021  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

203 Park Ave. SE

Aiken, SC 29802

or put in the collection basket

For office use: Check# \_\_\_\_\_ Amount \_\_\_\_\_

# ST. MARY HELP OF CHRISTIANS CATHOLIC CHURCH

## Totus Tuus Week

July 26-30th, AD 2021

8:30 AM - 2:45 PM

### VOLUNTEER REGISTRATION FORM AND LIABILITY WAIVER

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

Age \_\_\_\_\_ Grade entering in Sept. 2021 \_\_\_\_\_ cell phone \_\_\_\_\_

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

Parent Contact: \_\_\_\_\_

Parent Phone: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

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

Family Doctor: \_\_\_\_\_

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

Family Health Plan: \_\_\_\_\_ Policy # \_\_\_\_\_

Allergies/Limitations \_\_\_\_\_

**Those OVER 18** must be **Safe Haven** trained and complete volunteer paperwork.

**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 Totus Tuus.

**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** \_\_\_\_\_

**St. Mary's Camp Catholic 2021**

**Sunday – Thursday**

**July 25-29 at 7 pm-9 pm**

High School Program (for children entering Grades 7<sup>th</sup> -12<sup>th</sup>)

On Thursday, July 29, we will have an away fun activity.

**Registration Fee is \$10.00 per child**

**Registration deadline is Wednesday, July 21**

Please fill out a registration form for EACH child.

Child's Name \_\_\_\_\_ Grade entering Sept. 2021 \_\_\_\_\_

Male \_\_\_ Female \_\_\_ Age \_\_\_\_\_ Has child received First Communion? YES NO

Parent's Name: \_\_\_\_\_

Phone# \_\_\_\_\_ (in case of emergency)

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

I/We would be willing to help with Catholic Camp 2021  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: \_\_\_\_\_

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