



**Totus Tuus Registration Form  
Corpus Christi  
Rising 1<sup>st</sup> – 6<sup>th</sup> grade  
Mon, July 23 – Fri, July 27, 2018**

Participant Name \_\_\_\_\_

Grade (upcoming school year) \_\_\_\_\_ DOB \_\_\_\_\_

Address \_\_\_\_\_  
Street City Zip Code

Primary Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_

Phone Number of Emergency Contact \_\_\_\_\_

Current Medications \_\_\_\_\_

Medical/Drug Allergies \_\_\_\_\_

Food/Other Allergies \_\_\_\_\_

**Cost:** 1 child - \$20; 3 or more - \$45.

**Lunch:** Please provide a bag lunch each day

**Schedule:** 9:00 am – 2:30 pm. Pick-up and drop-off in parish center.

**Medical Release**

In the event of an illness, I request that the designated volunteer or the Coordinator of Youth Evangelization obtain medical treatment on my behalf for my student if I or the emergency contact cannot be reached. Prescription medication will be given in its original container with dosage information on it. I understand reasonable precautions will be taken to safeguard the health and well-being of my child and that I will be contacted immediately in case of emergency or accident. I will not hold the Parish, Diocese of Phoenix, the Chaperone or Coordinator of Youth Evangelization responsible for accident or injury.

**Behavior Agreement**

My child, named above, will dress and act respectfully; use no verbal or physical abuse of self or others; will be responsible for their own belongings; and will not leave the designated area at any time for any reason without contacting the adult in charge. I understand that if the child named above is involved in serious disruptive behavior that I will be contacted immediately and be responsible for their immediate transportation home.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_