

St. Paul Religious Education Office
1420 Ninth Street
Highland, Il. 62249
618-654-2339 ext 216
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TOTUS TUUS REGISTRATION FORM 2011
July 10th through July 15th, 2011
Grades 1-12

Student's Name: _____
Parent's Name: _____
Parent's Address: _____
Parent's E-mail: _____
Phone Number: _____ Cell: _____
Grade entering _____

Any special needs we should know about your child: _____
_____.

Cost is \$20.00 per student for the week.

More information will come later, hopefully by e-mail.

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We need your help:

_____ I can provide housing for team members(They stay in pairs)

_____ Prefer Male or Female.

_____ Can help serve snack for grade 1-6

_____ Can help serve lunch for grades 1-6

_____ Can help serve snack for evening session.

_____ Can provide dinner for team one night (team is a total of 4 people). Name the day _____ Days needed: Sunday, Monday, Tuesday, Wednesday.

_____ Can provide lunch for team (8 people) one day. Name your day _____. Days needed: Sunday, Monday, Tuesday, Wednesday and Thursday.

_____ Number of your family coming to the Potluck on Thursday evening. Parish will provide meat, drinks, paper product and plastic ware.

Thank you and God bless.