

**PLEASE READ:  
IMPORTANT  
MESSAGE**

Before registering your camper, please read the following:

- Each camper needs a separate form and please circle which week they will be attending - either Week 1 or Week 2 - **if attending both, please circle both weeks**

- PLEASE list someone other than the camper's parent or guardian for the EMERGENCY CONTACT- We call the camper's parent/guardian(s) first!

- If your camper has a friend they would like to be assigned with:

Requests are limited to **NO MORE than 2. Requests MUST be in the same grade as your child currently and MUST be mutually made.** Crews are made at the discretion of the Director and Planning Team with a mix of boys/girls, Catholic/Public schools, parishioners/visiting and as close to an "even" number as possible. Assignments are for attendance/ arrival/dismissal purposes. Grade level crews travel together through rotations. **If you are unsure of your requests at this time, requests can be emailed to Jess Otto (contact info below). They should be made NO LATER THAN June 1<sup>st</sup>. Any requests made after June 2<sup>nd</sup> may not be considered. PLEASE REMEMBER THEY MUST BE MUTUALLY MADE!!!**

- If your child requires **ANY** medication during their time with us, a current doctor's note is required. It should be on letterhead or prescription pad with the dosage information. (We have a NYS RN/Paramedic on our staff both weeks.) You will receive a call from Jess prior to the beginning of VBS 2023 to discuss

- We will again be offering a lunch option of plain regular or plain gluten free pizza for an additional fee. **Orders are due no later than June 26<sup>th</sup>.** Please see attached form for more information. Forms (and cash payment) should be dropped to the White House or Rectory buildings in an envelope marked "VBS Pizza Order"

- You will receive a letter in the mail with your child's assignment (*along with important information for the week*) at the end of June. **If you do not receive it by June 30<sup>th</sup>, please contact Jess Otto**

- All paperwork should be returned to the White House or Rectory (with payment). If you have any further questions, or need to get in touch with Jess, please email [jotto@stmaryei.org](mailto:jotto@stmaryei.org) or call the Office of Youth & Family - 631-581-4266 ext. 131. Jess is in the office Tuesday through Thursday



For Director Only:  
Crew Assignment:

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**Please PRINT and complete ALL highlighted information:**

**Camper Name:** \_\_\_\_\_ M/F

**Camper is attending:** *(if attending both weeks, please circle both)*

**Week 1      Week 2**

**Age & Date of Birth:** \_\_\_\_\_ **Current Grade:** \_\_\_\_\_

**School Camper Attends:** \_\_\_\_\_

**Mailing Address:** *(Please include Town and Zip Code - Great River, include your P.O. Box #)*

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**Email Address:** \_\_\_\_\_

**Parent/ Guardian #1:** *(Name, Contact Phone Number & Relationship to child)*

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**Parent/ Guardian #2:** *(Name, Contact Phone Number & Relationship to child)*

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**Emergency Contact:** *(Name, Phone Number & Relationship to child)*

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**Please read the following and initial:**

I understand that it is my responsibility to provide my child/children with a proper non refrigerated lunch and snack each day that *they can open themselves*. We are a **NUT FREE** camp.

I understand that my child/children **MUST** be able to apply sunscreen and dress **THEMSELVES** in the event it is needed.

My child's picture **MAY** be taken throughout the week to be used for advertising and marketing purposes throughout the parish (website & social media)

**Shirt Size: Please circle one**

All campers receive a FREE shirt.

*(Shirts Ordered After 6/1 MAY be a PLAIN COLORED SHIRT)*

**Youth Sizes**

**Adult Sizes**

Youth Small    Youth Medium

Small    Medium    Large

Youth Large    Youth X-Large

X-Large    XX-Large

**Friend Requests:**

**(NO MORE THAN 2. They MUST BE CURRENTLY IN THE SAME GRADE & MUST BE MUTUALLY MADE TO BE CONSIDERED)**

1.) \_\_\_\_\_ 2.) \_\_\_\_\_

**Medical & Special Needs Information:**

**Does this camper have a medical or special need we should be aware of?**

*There is NO ISSUE TOO SMALL!*

*The more we know, the more we can help them to be comfortable.*

**Does your camper have any allergies?** *If allergies exist - will they require any medication during VBS? Do they need to be separated at snack and lunch? (If camper requires or may need medication, a doctor's note (on letterhead or prescription pad) with dosage information MUST be supplied along with the medication.)*

**Can this camper have an ice pop at lunch?**

**Circle One:**    Yes    No

*(If the answer is no, please supply a frozen treat for them to enjoy at lunch.)*

# Camper Pizza Order Form

Order Form (with payment) should be returned to the White House or Rectory  
in an envelope marked "VBS PIZZA ORDER"

**NO LATER THAN JUNE 26<sup>th</sup>!**

**Payment MUST be made in cash.**

**Camper Name: (One form per camper)**

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I am ordering for: \_\_\_\_\_ Week 1 \_\_\_\_\_ Week 2 \_\_\_\_\_ Both Weeks

## **Check One Option**

### **Option #1 -**

Order All 5 Days: (Gluten Free Option - Add \$3)

\_\_\_\_\_ 1 slice and a drink ☆ - \$15

\_\_\_\_\_ 2 slices and a drink ☆ - \$20

### **Choose Your Drink:**

\_\_\_\_\_ Water

\_\_\_\_\_ Juice Box (brand and flavor will depend on availability at time of purchase)

### **Option #2 -**

Order Daily (Gluten Free Option - Add \$1 per day)

\_\_\_\_\_ Monday \_\_\_\_\_ Tuesday \_\_\_\_\_ Wednesday \_\_\_\_\_ Thursday \_\_\_\_\_ Friday

\_\_\_\_\_ 1 slice and a drink ☆ - \$4

\_\_\_\_\_ 2 slices and a drink ☆ - \$6

### **Choose Your Drink:**

\_\_\_\_\_ Water

\_\_\_\_\_ Juice Box (brand and flavor will depend on availability at time of purchase)

Total Due at order: \_\_\_\_\_

**Payment MUST be made in cash!**