

St. Anthony Parish TOTUS TUUS July 13-18

Limited Attendance, First Registered receives the opening

Please Mail to Parish Office 15 Indianola Rd. Des Moines, 50315

1. Family Last Name \_\_\_\_\_ Today's Date \_\_\_\_\_

Father's name \_\_\_\_\_ Mother's name \_\_\_\_\_
(please include last names if different from child's last name)

2. Address \_\_\_\_\_ City/Zip \_\_\_\_\_

3. Phone Numbers: Home \_\_\_\_\_ Work #'s Father \_\_\_\_\_ Mother \_\_\_\_\_
Other Phone number's \_\_\_\_\_

4. E-mail address(s) \_\_\_\_\_

5. Emergency contacts in case you cannot be reached during TOTUS TUUS session:

Name Phone Relation to child

6. Is your family registered in St. Anthony Parish? ( ) Yes ( ) No

7. Student Information: Please fill in all information completely. Include last names if different from parents.

Table with 3 columns: Full Name (First, Last), Grade entering. Rows 1-4.

\*List any special concerns (example, ADD, physical restrictions, allergies, other)

Three horizontal lines for listing special concerns.

1st- 8th Grade runs Mon-Fri 9am to 3pm

High School runs Sun- Thurs 8pm to 10pm

Registration Fee:

\$20.00 per Child X # \_\_\_\_\_ Total \_\_\_\_\_

.....