

Save the Date!

Totus Tuus

Location: St. Edward, 201 Douglas Avenue, Henning, MN

Totus Tuus Day Program:

Students entering grades 1-6:

Monday-Friday, **July 20-24** from 9:00 am-2:30 pm

*Please provide a packed lunch/water bottle each day for your child(ren)

Totus Tuus Evening Program:

Students entering grades 7-12:

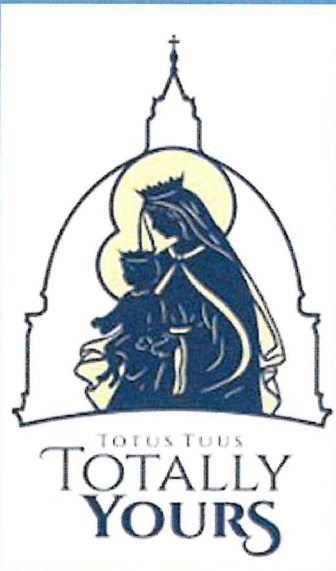
Sunday-Thursday, **July 19-23** from 7:00 pm-9:00 pm

*please reach out for transportation to

amyreligious@gmail.com or dpbradley61@gmail.com

***There is no cost for Parishoners of Disciples of the Mission.**

Please fill out registration form that can be found on the website



Totus Tuus 2025 1st thru 6th



Totus Tuus 2025 7th thru 12th

Totus Tuus 2026 Registration Form

Totus Tuus Programs:

Totus Tuus Day Program: Students entering grades 1-6: Monday-Friday, July 20-24 from 9:00 am-2:30 pm ***Please provide a packed lunch/water bottle each day for your child(ren)**

Totus Tuus Evening Program: Students entering grades 7-12 Sunday-Thursday, July 19-23 from 7:00 pm-9:00 pm

Totus Tuus will take place at: St. Edward's, Henning

*Do you have concerns for transportation? YES or NO

Program Leaders: Amy Evjen – 320-304-4127 (amyreligioused@gmail.com)
or Darby Bradley – 320-339-0686 (dpbradley61@gmail.com)



Name of Child(ren)	Date of Birth	Grade Entering	Received First Communion	Allergies/Behavior Needs:
			Yes NO	
			Yes NO	
			Yes NO	
			Yes NO	
			Yes NO	
			Yes NO	

Indicate amount needed next to size:

___ Youth Extra Small, ___ Youth Small, ___ Youth Medium, ___ Youth Large, ___ Youth Extra Large,
___ Adult Small, ___ Adult Medium, ___ Adult Large, ___ Adult Extra Large

(We will do our best to accommodate sizes, but T-shirts have been pre-ordered and cannot be guaranteed for children registering after June 15th)

Registration Form Due By: June 30, 2026

Form can be emailed to amyreligioused@gmail.com or dropped off at any of the Parish Offices in the ACC.

Parents Names: _____

Address (City, State, Zip): _____

Contact number: _____ Email: _____

I have completed the required separate release form and signed this parental consent for the child(ren) listed above to participate in the Totus Tuus Summer Program.

Parent/Guardian Signature _____

Release form REQUIRED: See back page of registration.

ADDITIONAL EMERGENCY CONTACT INFORMATION:

Name and phone number of an adult to reach in case of emergency in the event that you cannot be reached at the numbers above:

Name: _____ Contact #: _____

Name of Medical Care Provider: _____ Contact #: _____

Insurance Company: _____ Policy #: _____

Medical Authorization: I understand that the Catholic Diocese of St. Cloud, Disciples of the Mission ACC and Totus Tuus assume no responsibility for accidents which may occur in association with program events and activities. I agree to use my/our personal insurance to cover any such incidents. I understand that, in the event medical intervention is needed, every attempt will be made to contact me, and/or the persons listed above. In the event those individuals cannot be reached, I give permission to the physician or any other qualified medical staff selected by the event leader to hospitalize, secure medical treatment, and/or order injection, anesthesia, or surgery for Participant as deemed necessary.

Release of Liability for Youth and Adults: I understand all reasonable safety precautions will be taken at all times by the Catholic Diocese of Saint Cloud, Disciples of the Mission ACC and Totus Tuus and its employees and agents during the events and activities. I understand the possibility of unforeseen hazards and know the inherent possibility of risk. I agree to indemnify and hold harmless the Catholic Diocese of St. Cloud, the parishes of the ACC and Totus Tuus, its leaders, employees and volunteer staff from any and all claims arising from or in connection with attending this event.

Code of Behavior: I agree to abide by and/or instruct my child to abide by all rules and regulations as outlined by the aforementioned chaperones/representatives of the program. I agree that if a participant fails to abide in any way by the rules, that they can be dismissed from the event and sent home immediately with no right of reimbursement or refund.

Photo Release: I hereby authorize the Catholic Diocese of St. Cloud, the parishes of the ACC and Totus Tuus and its agents to utilize photographic and/or video images of me or my child. I understand that I will receive no compensation should any photograph and/or video of me or my child be used.

Date: _____

Signature of Parent or Guardian