



Vacation Bible School

for children ages 5 - 10

Monday - Friday

August 10 - 14

9 a.m. - 12 p.m.

(Sorry no early drop offs or
late pick-ups)

Registration is free

All snacks are peanut-free

A wholesome, nurturing,
stimulating and enriching
program for your child!

For more information,

Contact Jane

j.bartermoulaion@uwinnipeg.ca

235-1545



stmarymagdalene

3 St. Vital Road Winnipeg, Manitoba

R2M 1Z2

253-0555



Bible stories

Crafts

Games

Sports

Outdoor Adventures

Fun

Service

St Mary Magdalene Anglican Church

Welcome to our church! St. Mary Magdalene Anglican church is a welcoming, diverse and intergenerational Christian community in the heart of St. Vital.

This year, our Vacation Bible School is a sign of our on-going commitment to nurturing children in the Christian faith.

The theme of this program is *God's Big Backyard*, which offers children a time to think about the world which God has made and how to help to care for it, in service to one another.

Each day, we will explore a biblical theme through stories, crafts, games and outdoor adventures.

Our leaders are trained in early childhood education, theology, and in Christian leadership and will do their utmost to ensure the safety of your child. Because space is limited, we ask you to register early.

Please send completed pre-registration forms to the church by mail, or e-mail Jane at j.bartermoulaison@uwinnipeg.ca

Confirmation of your child's place at the VBS will be made by phone.

What to bring:

- Comfortable clothes for playing, painting, etc.
- Comfortable running shoes
- A back pack or school bag
- Sunscreen
- Hat
- Towel
- A water bottle
- Bathing suit (for Friday)
- Towel
- Your smiles
- Your sense of adventure

A healthy snack will be provided!

Pre-registration form

Please mail to the church or send by e-mail to Jane

j.bartermoulaison@uwinnipeg.ca

Name of child _____

Age: _____

Name of siblings attending camp:

1, _____ Age _____

2, _____ Age _____

Name of parent/guardian

1 _____

Phone number _____

Alt: _____

2 _____

Phone number _____

Alt: _____

Does your child have any medical conditions? Yes No

Explain: _____

Does your child have any allergies?

Explain: _____

Manitoba Health # _____

Physician's name: _____

Phone number: _____

Who will be picking up your child?

Emergency contact (other than yourself) _____

Phone: _____