

# Enrollment Form

Child's Name: \_\_\_\_\_

Grade: \_\_\_\_\_

School: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

email: \_\_\_\_\_

Dates planning to attend:

- |                                       |                                      |
|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> September 30 | <input type="checkbox"/> December 30 |
| <input type="checkbox"/> November 10  | <input type="checkbox"/> January 2   |
| <input type="checkbox"/> November 11  | <input type="checkbox"/> February 15 |
| <input type="checkbox"/> November 23  | <input type="checkbox"/> February 16 |
| <input type="checkbox"/> December 23  | <input type="checkbox"/> February 17 |
| <input type="checkbox"/> December 26  | <input type="checkbox"/> February 20 |
| <input type="checkbox"/> December 27  | <input type="checkbox"/> April 5     |
| <input type="checkbox"/> December 28  |                                      |
| <input type="checkbox"/> December 29  |                                      |

To register for the Vacation Care ministry please return this form with payment for the first day or all days attending.

Make check payable to:

**Abiding Savior's Vacation Care Ministry**



**Abiding Savior Free Lutheran Church**

**4100 S. Bahnson Ave**

**Sioux Falls, SD 57103**

**(605) 371-3800**

Revised 4/11



Providing a place where children can  
safely abide under Christ's care and  
nurturing through the lives of  
committed Christians  
and Biblical principles.

**Abiding Savior Free Lutheran Church**  
4100 S. Bahnson Ave  
Sioux Falls, SD 57103  
(605) 371-3800  
clangman@knowingthesavior.org





"Whoever receives one child like this in My name receives Me; and whoever receives Me does not receive Me, but Him who sent Me."

Mark 9:37



## Our Vision

### We will ...

- 
 Unashamedly share the message of salvation **through Jesus Christ**
- 
 Teach children in a way that is **consistent with the Bible**
- 
 Prepare a **Christ-centered** staff & facility to nurture each child
- 
 Provide a **safe, caring, and fun** environment

## Our Fees

1 day ..... \$25  
 4 or 5 consecutive days..... \$85

Parents are responsible for field trips costs.

Payment will be required on or before the last day of each registration deadline for each day or days of care.

Refunds will not be given for any registered days that are missed.

Children who have completed K-5th grade are welcome to attend this ministry.

Vacation Care Dates	Registration Deadlines
September 30th	September 23rd
November 10, 11, 23	November 4th
Dec. 23, 26-30th, Jan 2nd	December 16th
Feb 15, 16, 17, 20th	February 10th
April 5th	March 30th

## We Provide ...

*Abiding Savior's Vacation Care Ministry* will provide care for children in grades K - 5. Our hours are from 7:00 am to 6:00 pm. Children are required to bring a sack lunch. Milk/juice or water will be provided.

We will be taking field trips, encouraging reading, offering physical activities, crafts, music and more.

For more information on Vacation Care please contact Christy Langman at 605-371-3800 ext. 125 or email [clangman@knowingthesavior.org](mailto:clangman@knowingthesavior.org).



### Daily Schedule

7:00 - 7:30 am	Arrival & breakfast
7:30 - 8:30 am	Free play
8:30 - 9:15 am	Circle time / devotions
9:15 - 11:30 am	Activities
11:30 - 12:30 pm	Lunch

### (schedule continued)

12:30 - 1:00 pm	Reading / quiet time
1:00 - 3:00 pm	Activities
3:00 - 3:30 pm	Snack
3:30 - 5:00 pm	Stations
5:00 - 6:00 pm	Free play / departure

