



Church of the Sacred Heart, Riverton, NJ

Today's date: _____

FAMILY LAST NAME: _____

(Please print)

Girl's Name: _____ Birthday ____/____/____ Grade in Fall: _____

Girl's Name: _____ Birthday ____/____/____ Grade in Fall: _____

Girl's Name: _____ Birthday ____/____/____ Grade in Fall: _____

Girl's Name: _____ Birthday ____/____/____ Grade in Fall: _____

Girl's Name: _____ Birthday ____/____/____ Grade in Fall: _____

Address: _____

City: _____, NJ Zip Code: _____

Home Phone: _____ Cell Phone: _____

Parish Name: _____

Mother's Name: _____ Father's Name: _____

Email: _____

WE NEED VOLUNTEERS!

The success of the Little Flowers Girls' Club relies on the participation of moms! We are hopeful to have enough interested girls to split into grade level groups. If you are willing to volunteer, please read the following descriptions and check any box that depicts an area in which you would like to help. A volunteer schedule will be provided prior to our first meeting in the fall.

Instructor*: This position will be for either the full nine-months or will rotate after several consecutive meetings depending on number of volunteers. The Instructor is responsible for the teaching of the month's corresponding virtue, saint and memory verse and the planning of related games or activities. We will provide a Leader's Guide with all necessary information. A list of suggested games/activities can also be provided.

Craft Leader*: This position will rotate monthly. The Craft Leader is responsible for leading the group in a craft activity relating to the month's virtue, saint, flower or memory verse and includes any necessary "prep" work. The craft activity and materials will be provided.

Meeting Aide*: This position will rotate monthly. The Meeting Aide is responsible for assisting the Instructor and Craft Leader as well as the children with activities during the meeting.

Families will also be asked to take turns providing snacks/drinks

*All Volunteers in contact with any children must submit to a criminal background check and take the Protecting God's Children class per Archdiocese of Trenton mandate. Forms and class information will be made available and fingerprinting cost will be reimbursed.

Mail completed registration form, medical release and check made payable to Sacred Heart Church to:
Little Flowers Girls' Club c/o Sacred Heart Church, 103 Fourth Street, Riverton, NJ 08077

For office use only:

Number of Girls Registered _____

Each Girl: \$20.00

Check# _____ Cash _____

Registration Fee Total Due \$ _____

Total Paid \$ _____

registration taken by: _____ date: _____