

If you have questions,
contact your parish rep:

Julianne Leighton

763-496-5144

jleighton@saintsppta.org

Pam Dombeck

763-478-6644, ext. 3

dfo@saintannehamel.org

Andrew Zeisel

763-972-2077, ext. 111

Andrew@stmaxkolbechurch.org

All registration forms with
payment should be mailed to:

St. Thomas the Apostle

Attn: Julianne Leighton

20000 Co Rd 10

Corcoran, MN 55340

Registrations are due by
June 15, 2025, to receive a
t-shirt and to help with the
planning process.

Thank you!

For the *Totus Tuus* and
Tracking Mary programs, the
cost is \$45 per child to a
maximum of \$115 per family.

Choose the grade your child
will be in, in the fall of 2025,
and send in a completed
registration form with
payment by June 17, 2025.

1ST-6TH GRADE

Totus Tuus (9 am - 2:30 pm)
Monday-Friday, July 7-11, 2025
Please pack a bag lunch, snacks
will be provided.

Ss. Peter & Paul
150 Railway St. E.
Loretto, MN 55357

JUNIOR & SENIOR HIGH

Totus Tuus (6:00 pm - 8:30 pm)
Dinner Included!
Sunday-Thursday, July 6-10, 2025

St. Thomas the Apostle
20000 County Road 10
Corcoran, MN 55340

Totus Tuus

"Totally Yours"



Summer faith & fun week of 2025!

What is Totus Tuus?

- A Catholic Summer Youth Program
- It promotes the Catholic faith through catechesis, evangelization, Christian witness and Eucharistic worship.
- The goal is to help young people grow in the understanding of, and strengthen their faith in, Jesus Christ.
- It is by establishing a real and personal relationship with Jesus Christ that we can be led to the love of the Father in the Spirit and so be made sharers in the life of the Holy Trinity.

Important: Please, fully and carefully complete the following information!
Totus Tuus Registration

Parent's Name _____

Mailing Address _____ City _____

State _____ Zip _____ Contact Name and Phone No. _____

Email _____ Parish _____

In case of emergency contact:

1. _____

Contact Name

Relationship to child

Phone Number

2. _____

Contact Name

Relationship to child

Phone Number

Child's Name _____ Date of Birth _____ Grade going into _____

List allergies/medical conditions: _____

Provide a separate page if necessary to insure clear communication.

For approval to use my child(ren)'s photo in the bulletin. Please sign:

T-Shirts are Free and available **only** if registered by **June 15, 2025**. **Please place child's initials next to their size.**

Child: S _____ M _____ L _____ XL _____

Adult: S _____ M _____ L _____ XL _____ XXL _____