

The Office for Evangelization of the Catholic Diocese of Richmond
is pleased to announce the

2017-2018 DISCOVERY & CHRISTIAN AWAKENING RETREATS

ABOUT THESE RETREATS:

	DISCOVERY	CHRISTIAN AWAKENING
What is it?	A peer-ministered retreat which encourages teenagers to discover their own identity and their relationship with God. The retreat is incredibly dynamic with talks, small group interaction and community-building experiences. It is based on the steps of evangelization and helps the young person know Jesus in faith!	A peer-ministered retreat which enables the teenagers to come to know and experience Christ, and to see him in themselves and others. Youth are invited to look at ways of serving others and becoming better, more fully committed Christians.
Who should go?	9 th or 10 th graders who are ready to dive deeper into understanding their relationship with Jesus.	11 th or 12 th graders who are ready to live their faith in a profound way. Christian Awakening (CA) builds on the foundational elements of the Discovery Retreat and is great for forming leaders in your parish community.
When can I go?	<p>Discovery 1: <u>December 8-10, 2017 in Scottsville, VA</u> Register online by 11/28/17 to receive early bird pricing</p> <p>Discovery 2: <u>January 12-14, 2018 in Smith Mountain Lake, VA</u> Register online by 1/2/18 to receive early bird pricing</p> <p>Discovery 3: <u>February 23-25, 2018 in Smith Mountain Lake, VA</u> Register online by 2/13/18 to receive early bird pricing</p>	<p><u>October 13-15, 2017 at Camp Bethel (near Fincastle, VA)</u> Register online by 10/31/17 to receive early bird pricing</p>

REGISTRATION:

All registrations are entered online. Registration forms are to be filled out and given to the parish youth coordinator by the deadlines above to be entered online. The Office for Evangelization **will not** accept any registrations that are sent via USPS or fax.

PAYMENT INFORMATION:

The participant cost for all retreats is **\$165** and covers all lodging, meals, and supplies for the weekend. An early bird rate of **\$140** will be applied for all registrations entered by the dates listed above. An invoice will be sent after all retreats have concluded to each parish for any unpaid registration fees. Parishes should send the registration fee (made payable to the Catholic Diocese of Richmond) for each participant to: Office for Evangelization; 7800 Carousel Lane; Richmond, VA 23294.

Cancellation Policy: To avoid penalty, cancellations must be made on or before the following dates, for *Christian Awakening*: September 29, 2017; *Discovery 1*: November 22, 2017; *Discovery 2*: December 29, 2017; and *Discovery 3*: February 9, 2018.

Registrations cancelled after these dates will incur a \$100 penalty. No shows will not receive a refund. Cancellations must be received in writing via email at evangelization@richmonddiocese.org. No phone cancellations will be accepted.

Substitution Policy: Substitutions will incur a \$25 fee. All substitutions must be made in writing via email at evangelization@richmonddiocese.org.

QUESTIONS?:

Contact the Office for Evangelization at the Catholic Diocese of Richmond via phone at 804-622-5159 or via email at evangelization@richmonddiocese.org.

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Attention youth minister/coordinator:

Registration must be entered online by the **registration date** listed below to qualify for the early bird rate.
 Send payments to the Office for Evangelization; Catholic Diocese of Richmond; 7800 Carousel Lane; Richmond, VA 23294

Please select the retreat, location, and date that you would like to attend from the list below:

Discovery Retreats (9 th & 10 th graders)		Christian Awakening Retreats (11 th & 12 th graders)
Discovery 1: <u>December 8-10, 2017 in Scottsville, VA</u> <i>Register online by 11/28/17 to receive early bird pricing</i>		<u>October 13-15, 2017 at Camp Bethel (near Fincastle, VA)</u> <i>Register online by 10/3/17 to receive early bird pricing</i>
Discovery 2: <u>January 12-14, 2018 in Smith Mountain Lake, VA</u> <i>Register online by 1/2/18 to receive early bird pricing</i>		
Discovery 3: <u>February 23-25, 2018 in Smith Mountain Lake, VA</u> <i>Register online by 2/13/18 to receive early bird pricing</i>		

YOUTH INFORMATION

First Name: _____ Last Name: _____

First Name for Nametag: _____

Address: _____

City/State/Zip: _____

Home Phone: _____

Cell Phone: _____

Email: _____

Parish Name: _____ City: _____

Gender: _____ Birthday: _____ Grade: _____

PARENT / GUARDIAN INFORMATION

Name: _____ (Father) _____ (Mother)

Cell Phone: _____ (Father) _____ (Mother)

Email: _____ (Father) _____ (Mother)

EMERGENCY CONTACT INFORMATION

Name: _____

Contact Number: _____

Relationship to Participant: _____

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MEDICAL INFORMATION

*In many cases, our staff and volunteers are not familiar with the medical, physical, and/or emotional history of each participant. Please share **ANY** information relating to the participant in detail. BE AS SPECIFIC AS POSSIBLE.*

<p>Does the participant have any dietary restrictions?</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p>	<p>Select any restrictions that apply to this participant:</p> <p><input type="checkbox"/> Gluten-free <input type="checkbox"/> Peanut-free <input type="checkbox"/> Vegetarian</p> <p>List any other dietary restrictions (i.e. vegetarian, allergies)</p>
<p>Is the participant allergic to anything?</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p>	<p>List any details of allergies below (this may include food allergies, allergies to specific medications or chemicals, allergies to any substances):</p>
<p>Is the participant currently taking or has taken any prescription medication in the last 6 months?</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p>	<p>List the specific prescription medications, reasons for medication, and daily dosage. Indicate if the medication is currently being administered.</p>
<p>Does the participant have any emotional, physical or sensory conditions?</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p>	<p>List any emotional conditions that may impede participation in the event. This may include counseling, treatment for emotional conditions (i.e. depression, eating disorders), and/or family situations that may have a significant impact on the participant. List any physical and/or sensory conditions of which we should be aware or of which need special accommodations (e.g. hearing loss, visual impairment, mobility).</p>

RELEASE OF LIABILITY AND MEDICAL RELEASE

As parent and/or legal guardian I remain legally responsible for any personal actions taken by the above named minor. I agree on behalf of myself, my child named herein, or our heirs, successors, and assigns, to hold harmless and defend the Catholic Diocese of Richmond, its employees and agents, chaperons, or representatives associated with this event from any claim arising from or in connection with my child attending the event or in connection with any illness or injury (including death) or cost of medical treatment in connection therewith, and I agree to compensate the Diocese, its employees and agents and chaperons, or representatives associated with the event for reasonable attorney's fees and expenses which may incur in any action brought against them as a result of such injury or damage, unless such claim arises from the negligence of the Diocese.

I hereby warrant that to the best of my knowledge, my child is in good health, and I assume all responsibility for the health of my child. In the event of any emergency, I hereby give permission to transport my child to a hospital for emergency medical or surgical treatment. I wish to be advised prior to any further treatment by the hospital or doctor. In the event of an emergency, if you are unable to reach me at the above numbers I give permission for the noted emergency contact to be notified. I will not hold the Diocese of Richmond responsible for authorizing any medical treatment beyond necessary transportation to the hospital.

Parent/Guardian Signature: _____ Date: _____

USE OF PICTURES AND/OR VIDEO

*I give permission for pictures and/or video of my child (named above) engaged in activities related any Diocesan event to have their pictures posted in the Diocese of Richmond publications or websites. Names of participants **will not** be used without expressed permission from the parent or guardian. If no box is checked below, the Diocese of Richmond assumes you give permission.*

YES NO Parent/Guardian Signature: _____ Date: _____

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YOUTH CODE OF CONDUCT

Youth participants must read, understand, agree, and sign this Code of Conduct. Each participant is expected to adhere to the following principles while at a Discovery or Christian Awakening Retreat:

SHOW LOVE AND RESPECT FOR GOD:

- ✓ Pray daily for self and others.
- ✓ Participate in opportunities to receive the Sacraments.
- ✓ Participate in the sessions, activities, and prayer experiences.
- ✓ Be open, flexible, and have a servant's attitude.
- ✓ Represent God in your words and actions.

SHOW LOVE AND RESPECT FOR SELF:

- ✓ Remember that you are the Temple of the Holy Spirit. Present yourself accordingly.
- ✓ No alcohol, drugs, or smoking will be tolerated during the weekend.
- ✓ Dress with modesty. Bare mid-drifts, spaghetti straps, short-shorts, low cut tops, or guys without shirts are not permitted during the weekend.
- ✓ Any music you bring and listen to should glorify God.
- ✓ Drink plenty of water, obey sleeping times, and make sure you eat all meals. This will allow you to fully participate and not be tired.
- ✓ If you must leave an activity, adult chaperones should accompany you since they are responsible for you.

SHOW LOVE AND RESPECT FOR OTHERS:

- ✓ All words and actions should be those of Christ to build up others and not injure.
- ✓ Make sure that your actions during the activities do not distract others from hearing, seeing, or praying.
- ✓ Be safe. No horseplay or other potentially harmful actions. Leave pocketknives, lighters, or other hazardous materials at home.
- ✓ No teenagers are allowed to drive to or from the retreat due to limited parking and liabilities.
- ✓ Under no circumstances can a youth be in the room or hall of a member of the opposite sex.
- ✓ Allow others to sleep. "Lights Out" means that it is time to go to sleep. Do not be in the showers or halls after "Lights Out".
- ✓ No outside or unregistered visitors at the retreat will be permitted.
- ✓ The facility must remain clean and undamaged. Otherwise, you will personally be responsible to pay for the damage. Don't bring food or drinks to the rooms and pick up trash if you see it.

OTHER INFORMATION:

- ✓ Any damages caused by the participant will be charged to the participant.

I have read, understand, and agree to the above principles. Any violation of the above principles may result in immediate dismissal from a Diocesan Retreat and participants will forfeit their registration fee.

Youth Signature: _____ Date: _____

Printed Name: _____

Parent Signature: _____ Date: _____

Printed Name: _____