

YOUTH MINISTRY FALL RETREAT!!! TEEN REGISTRATION FORM

7:00PM Fri. Nov. 16th- 11:00AM Sun. Nov. 18th

Retreat Theme: "Navigate"

Registration Deadline: Sun. Oct 28th, 2018

Our Youth Ministry is excited to announce that we will be having our 7th annual Fall Overnight Retreat the weekend of Fri. Nov. 16th-Sun. to Nov. 18th! All middle and high schoolers (grades 7-12) of our Parish are invited and strongly encouraged to attend! The fee is \$50. Meals will be provided beginning with a light snack Friday evening until breakfast on Sunday morning. Boys will be sleeping in the Gym and girls will be sleeping in the Spiritual Formation Center. Don't miss this awesome weekend of **prayer, food, music, games, faith-sharing, and fun with fellow Catholic teens!*

What TO Bring:

Sleeping bag & Pillow

Toiletries (deodorant, toothbrush, toothpaste, hand lotion, etc.)

Any medications that you use regularly (**NEEDS TO BE INDICATED ON THIS FORM!**)

Casual but **modest** clothes to wear Fri. night, all day Saturday, Sunday morning

Sleeping clothes for Friday & Saturday night

Appropriate clothing to wear to Morning Mass on Sat. & Sun. (Note: We'll wear our Retreat T-shirts Sunday!)

Umbrella & outdoors clothes (for games and outside time)

Board & card games (for down time)

Catholic/Christian music CDs

Your personal prayer materials (Bible, Rosary, holy cards, missalette, spiritual reading, etc.)

#1 Thing: A positive attitude, ready to go deeper with Christ and with each other!!!

What NOT to Bring:

Cell phones, I-pods, Kindles, etc. (Cell phones will be collected throughout the Retreat weekend so that we are able to spend time uninterrupted with the Lord and with each other!)

Further Questions??? Please contact Michele Beckman (751-1739 or mbeckman@stmagdalen.org)

**THANK YOU AND SEE YOU ON RETREAT!
BE A WITNESS: INVITE YOUR FRIENDS, NEIGHBORS, & CLASSMATES!**

***Please return registration form with \$50 per teen
(Cash or check payable to St. Magdalen de Pazzi Church) to:
Michele Beckman, Coordinator of Youth Ministry**

Mail: St. Magdalen de Pazzi Church, 105 Mine Street, Flemington NJ 08822

Office: You may drop forms to Michele's office or to the Parish Office Mon-Fri 9:45-12, 1-4PM

At Youth Ministry Events: Feel free to hand in form & payment to Michele at ANY Youth Ministry event!

Teen: _____
Last Name First Name Grade

Parent/
Guardian: _____
Last Name First Name phone

E-mail (Teen): _____

E-mail (Parent): _____

Emergency Contacts (2):

Name Phone Relation to teen

Name Phone Relation to teen

Allergies or Medical Conditions?

*Please note that parish representatives are NOT permitted to dispense medication.

T-shirt size : Name _____ child S (6-8) M (10-12) L (14-16) adult S M L XL

Photo Approval: *I am an adult over the age of 18 years and I am the parent or legal guardian of the above named. I have full authority and authorize St. Magdalen de Pazzi and the Diocese of Metuchen to display pictures containing images, first and last names or descriptions of activities portrayed in the photographs of my child/ren taken at the Fall Retreat.*

photo & name ___Agree ___Disagree *photo only* ___Agree ___Disagree

Signature of Parent or Guardian Printed Name of Parent or Guardian Date

Emergency Medical Treatment Authorization: *I request that my son/daughter participate in the above-described activity of the Church of St. Magdalen de Pazzi. Should emergency medical treatment be necessary and I am unable to be contacted immediately, I authorize the delegated agents of St Magdalen's to act on my behalf and approve appropriate treatment. I specifically waive claim(s) that may be derived from any accident or injury sustained by my son/daughter during the activity. I further agree to indemnify and save harmless the above-named church, the Catholic Diocese of Metuchen, their staff, and all adult supervisors working on their behalf.*

Parent/Guardian Signature: _____ Date: _____
Insurance Company _____ Policy # _____