

Sophomore Boys' Journey Retreat

2011-2012

- WHEN:** January 28-29, 2012
- WHERE:** St. Peter Catholic Church / Marist
- TIME:** 11:30 am Saturday – noon Sunday
***Students are not allowed to arrive late or leave early – you are committed to the whole time!**
- COST:** \$35.00. Due with registration, unless special arrangements are requested (see back of form)
- HOW TO REGISTER:** Drop your completed registration form by Mrs. Clemens' office in the Administration building. **Note the deadline below.**
- DEADLINE:** *Registrations must be received:*
NO LATER THAN THURSDAY, JANUARY 13TH
Cancellations after this date cannot be fully refunded
- QUESTIONS:** Contact Mr. Martin
- WHAT TO BRING:** FIRST AND FOREMOST YOURSELF, READY TO COOPERATE WITH THE TEAM, AND WITH YOUR CLASSMATES IN MAKING THIS A MEMORABLE EXPERIENCE FOR ALL. **THEN...** BRING CASUAL CLOTHES, A SLEEPING BAG/PILLOW, ETC., TOILETRIES (SHOWERS AVAILABLE) A SENSE OF HUMOR, AND A SMILEY FACE.
- WHAT NOT TO BRING:** **CELL PHONES, IPODS, ETC., AND ALL THOSE OTHER THINGS YOU ALREADY KNOW ABOUT THAT ARE NOT GOOD FOR YOUR BODY OR YOUR SPIRIT. OH! AND A POOR ATTITUDE!!!**
- DIRECTIONS:** Meet at St. Peter's Catholic Church at 11:30am. The address is 1150 Maxwell Rd. From River Rd., head west on Maxwell. St. Peter's is just east of the overpass over the Northwest Expressway. Phone #: 688-1051.
- SUNDAY PICK-UP IS AT MARIST @ 12:00 NOON**

Student: I, _____, the undersigned student, understand that I have a responsibility to abide by the rules, regulations, and instructions which are provided for the 2011-2012 Marist Sophomore Boys Retreat. I understand that these rules, regulations, and instructions are provided for the safety, security, well-being, and respect of others as well as myself.

I understand that the use and/or possession of alcohol and/or drugs (including tobacco), is not acceptable. If I should be found in possession of and/or using such substances, I understand and agree that I will notify my parent or guardian at the time of discovery and that I will be returned home immediately at my own and/or my parents' expense.

I understand finally, that any other serious failure to act responsibly in regard to rules, regulations, instructions, and common human understanding may also result in the notification of my parents and my being returned home.

Student Signature _____ **Date** _____

* * * * *

Fee: _____ Enclosed (Checks only, please – exception made for International students only)

_____ Special arrangements requested (It is Marist policy not to turn away any student from a retreat experience due to lack of funds. We ask therefore that you stipulate a payment plan or a total amount which you can pay on the line below):

* * * * *

Do you have any dietary restrictions or special needs (i.e., vegetarian)? If so, please describe:

