



Please return form by **March 5**

HOLY FAMILY PARISH
STUDENT PERMISSION FORM FOR PARTICIPATION
TRUE RETREAT, MAR. 16-18
Statement of Consent

I hereby consent to participation by my child, _____,
in the event described in the event flyer/brochure scheduled for True Retreat

In consideration of my child being allowed to participate in this event, I agree to waive and release, and indemnify and hold harmless Holy Family Parish, any and all affiliated organizations, its/their employees, agents, representatives, volunteers and drivers, from any and all claims I or my child may have, excluding claims for intentional misconduct or gross negligence, arising from or relating to my child's participation in this event.

I authorize Holy Family Parish to obtain necessary medical treatment for my child in case of illness, injury or accident. List allergies, medication, dietary needs, learning needs, contacts, or other pertinent comments that may affect his/her participation in this event. *Please also include instructions about these needs* for the adult supervisor of this event if applicable.

During this event, I can be reached at _____

I certify that I am the (check one) ___ custodial parent ___ legal guardian of the minor child named above and I agree to the above terms for myself and for my minor child. Please list any custodial concerns/ agreements which may affect your child's participation in this event.

I understand that photographs and video may be taken during this event for future publicity, but would be used without my child's name, and that by consenting to my child's participation in the event, I am consenting to said photography and videography.

_____ Print Parent's Name

_____ Parent's Signature



**Come join us for the High School retreat
on the beautiful shores of
Lake Michigan at Camp Geneva**



goodness | beauty | love

March 16-18, 2018

To allow you time for family and homework after the retreat,
there will be no High School Faith Formation Classes
(Middle School will still meet) on Sun., Mar. 18



We are surrounded by a lot of ‘opinions’ everyday - in school, at home, and with friends. But what about when opinions aren’t enough? We also hear people using vague phrases like “my truth” and “your truth”. But what if you’re craving the REAL authentic truth? During this weekend retreat at Camp Geneva, high schoolers will explore what is true about the things that matter: true goodness, true beauty, and true love. It will be a weekend of fun, bonding, and praising our Lord, who is Himself, the Author of truth.

True Retreat Information

Retreat begins on Fri., Mar. 16 at 6:00pm and ends on Sun., Mar. 18 at 12pm. Transportation to and from Camp Geneva will be provided by Holy Family.

Required for registration – due by **March 5:**

- ◇ Student Registration and Permission Form
- ◇ Payment: \$50.00 for Parishioner and \$65.00 for Non-Parishioner Guest (non-refundable)

Financial Hardship: We believe retreats are an important part of a student’s faith formation; so no one will be denied participation due to financial hardship. Please contact the CFF office to confidentially discuss your needs.

- ◇ **Medical Release** (if not previously submitted with your CFF 17-18 registration)

Retreat details will be sent via email after your registration, permission form and payment have been received.

If you have any questions, please contact Whitney Cunningham, Coordinator of Middle & High School Youth Ministry at youthministry@holymfamilycaledonia.org or Mary Krell in the CFF office at 891-8867 or mkrell@holymfamilycaledonia.org

Registration: Retreat, Mar. 16-18, 2018

Registration and Permission form due by **March 5**

- Yes! I have submitted my payment
- Yes! I have completed the Permission Form (on the back)

Student Name: _____

Parent Name: _____

Parent Email: _____

Phone: _____

Parent Signature: _____ Date: _____

Non-Parishioner Guests:

- Please provide your name, address, phone and email
- Make sure you complete a separate Permission Form for *each* attendee
- A completed Medical Release is required to attend this event.
Medical Releases are available online at www.holyfamilycaledonia.org

Guest Name: _____

Guest Parent Name: _____

Guest Parent Email: _____

Phone (best contact number): _____

Guest of: _____

Parents: Your help is needed!

Can you be a chaperone for the weekend?

Yes
 Yes, but at these times only _____
 No

All adults must have completed all Diocesan Background Check requirements and have attended a Protecting God’s Children session.