

This portion to be completed by parish staff: Paid by: Cash \_\_\_\_ Cheque \_\_\_\_ Initials \_\_\_\_



## RETREAT WEEKEND AT ST. FRANCIS XAVIER PARISH January 26 – 27, 2019

### PARTICIPANT INFORMATION:

Participant Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ School (if applicable): \_\_\_\_\_  
Email: \_\_\_\_\_

### FAMILY CONTACT INFORMATION:

Main Contact Name: \_\_\_\_\_ Emergency Contact (if Main can't be reached)  
Home Phone Number: \_\_\_\_\_ Name: \_\_\_\_\_  
Work Phone Number: \_\_\_\_\_ Relationship to participant: \_\_\_\_\_  
Cell Phone Number: \_\_\_\_\_ Phone Numbers: \_\_\_\_\_

### MEDICAL INFORMATION:

Allergies (i.e. bee stings, peanuts, medications, seasonal, etc.):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Additional medical/physical/emotional concerns that the retreat leaders should be aware of (i.e. medical conditions, medications that need to be brought to the retreat, anxiety, etc.):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### PERMISSION STATEMENT:

#### If under 18:

I grant the above-named person permission to participate in St. Francis Xavier Parish's World Youth Day retreat on January 26 – 27, 2019. I agree to hold the parish and its staff and volunteers harmless for any untoward event that may occur (injury, damage to or loss of belongings, etc). I give my permission for medical care to be sought for this person if it is deemed necessary and/or in the event that I cannot be reached.

Parent/Guardian Name: \_\_\_\_\_  
Signature: \_\_\_\_\_  
Date: \_\_\_\_\_

#### If 18 or older:

I would like to be a participant in St. Francis Xavier Parish's World Youth Day retreat, taking place on January 26 – 27, 2019. I agree to hold the parish and its staff and volunteers harmless for any untoward event that may occur (injury, damage to or loss of belongings, etc). I give my permission for medical care to be sought for me if it is deemed necessary and/or in the event that my main and emergency contacts cannot be reached.

Participant Name: \_\_\_\_\_  
Signature: \_\_\_\_\_  
Date: \_\_\_\_\_

# Information for Participants

Thanks for your interest in the World Youth Day retreat! Here's more info for you:

**Start Time:** Saturday, January 26, 2019 at 2:00PM

**End Time:** Sunday, January 27, 2019 at 2:00PM

**Location:** Parish Centre of St. Francis Xavier Parish

**Age:** 16 years and up

**Cost:** \$25

- Cheques can be made payable to "St. Francis Xavier Parish"

**Registration Deadline:** *Monday, January 14, 2019*

- Please return registration forms and payments to the parish office (304 Highway 8)

## **What will happen at the retreat?**

- Discover what World Youth Day is all about
- See a presentation about our parish group's pilgrimage to the 2016 World Youth Day in Krakow, Poland
- Watch coverage of the closing Prayer Vigil and Papal Mass of World Youth Day 2019 in Panama
- Explore the theme of this year's World Youth Day through games, prayer, reflection, and other activities
- Get to know others from our parish community who are interested in attending a future World Youth Day
- Share dinner, breakfast, and lunch
- Attend Mass together
- Discover the location and date for the next World Youth Day!

## **What to bring:**

- Bible
- Sleeping bag & pillow
- Air mattress or foam sleeping pad if you have one
- Personal toiletries (toothbrush, toothpaste, etc.)
- Medication (prescriptions, Advil or Tylenol if prone to headaches, etc)
- Water bottle
- Pajamas
- One or two sets of comfortable clothing (appropriate for church)
- Clothing for outdoors (please check the forecast ahead of time)
- Things for free time (books, games, etc.)
- Slippers or indoor shoes
- Nut-free snacks for yourself (snacks and drinks will also be provided throughout the retreat with consideration for allergies)

Please feel free to contact Wes Moga (St. FX Youth Minister) if you have any questions:  
905-662-8593 (prior to retreat) or 905-730-0946 (during retreat)

[soundofmusic1986@gmail.com](mailto:soundofmusic1986@gmail.com)