



## REGISTRATION AND PERMISSION FORM

**What is a Retreat Weekend?** The Acts of Apostles record that it was at Antioch that the disciples were first called Christians (Acts 11:26). During the early time of the church, the community was recognized as a particularly faithful, vibrant, loving and prayerful people of God. Our goal is to capture the spirit of the first Christians and come to a better or deeper understanding of our faith and our relationship with God, self and others.

**What is The Retreat Like?** It is a dynamic weekend full of sharing, discussions, music, fun, food and much more. This weekend is facilitated by 12 high school students under the direction of Elaine Coupe - Youth Minister, Father Santos and an adult team.

**Who Can Go?** This is a parish high school retreat. Any high school student who is either a member of St. Bartholomew the Apostle Parish or the Youth Group can attend. However, high school students from other parishes can attend if they are invited by a high school parishioner, Retreat Team member, member of the Youth Group or St. Bartholomew Youth Minister

**When is The Retreat Weekend?** January 29 – 31, 2016 – Friday 7:00 pm until Sunday Noon. ***Students must commit to the entire weekend (there are no exceptions).*** For students who are in winter sports or activities, please contact your coaches and/or advisors to let them know that you will not be available for practices, meets, scrimmages or meetings during this time.

**Is There A Sign-Up Deadline?** Yes! The deadline to register for the 2016 Antioch Retreat is Sunday, January 17, 2015. Please Note: We only have space for 25 candidates and it does fill up quickly. So PLEASE sign up early so you are not disappointed!

**Where Will The 2016 Antioch Retreat Held?** Fellowship Deaconry Ministries Retreat Center, 3575 Valley Rd. Liberty Corner (Basking Ridge), NJ 07938. It is a fifteen minute drive off of Route 78. Students will need to be dropped off and picked up.

**How Much Does the 2016 Antioch Retreat Cost** - \$100.00 – Fee includes lodging, all meals, snacks and supplies. Money should not be an issue for not attending the retreat. Please contact Elaine Coupe, Youth Minister at 908 472-6096 to discuss any financial hardships. We do have scholarships available.

**Questions?** Please feel free contact our Youth Minister, Elaine Coupe at (908) 472-6069 or by email at kecoupe@verizon.net.

**Where Do I Send My Registration Form?** Please submit your Registration /Permission Form to the Rectory in an envelope marked "Elaine Coupe, Youth Minister, on or before Sunday, January 17, 2015 with a check in the amount of \$100.00 payable to: St. Bartholomew the Apostle Church. Or you can mail it to:

**St. Bartholomew the Apostle Church  
GPS Retreat Registration – Attn. Elaine Coupe  
2032 Westfield Ave.  
Scotch Plains, NJ 07076**

**We hope you can join us on this faith journey as we explore, question and learn while building our relationship with God and each other.**

## 2016 Antioch Retreat Registration *(to be completed by candidate)*

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Parish or Church \_\_\_\_\_ School \_\_\_\_\_

Birth Date \_\_\_\_\_ Age \_\_\_\_\_ Gender: M / F Grade \_\_\_\_\_

E-Mail (PLEASE PRINT CLEARLY) \_\_\_\_\_

t-Shirt Size: \_\_\_ Small \_\_\_ Medium \_\_\_ Large \_\_\_ X-Large \_\_\_ XX-Large

My hobbies/interests are:

I would describe myself as:

I would like to come to this weekend because:

I heard about it from:

Other retreats/conferences I have attended:

Candidate: I plan to attend the entire 2016 Antioch Retreat weekend, January 29<sup>th</sup>-31<sup>st</sup>, 2016. I have enclosed a check for \$ \_\_\_\_\_ with this registration payable to St. Bartholomew the Apostle Church. I promise to attend the 2016 Antioch Retreat Weekend with a positive attitude and a willingness to participate. I will respect the property of the retreat center at abide by the rules and regulations of the weekend in order to attain the greatest benefit.

Candidate Signature: \_\_\_\_\_

### **Parental Permission** (to be completed by a parent or guardian)

I give full permission for my son/daughter to participate in the 2016 Antioch Retreat Weekend held at Fellowship Deaconry Ministry Retreat Center from January 29-31, 2016. If I have any questions or concerns, I will take the initiative to gain information regarding regulations and guidelines by speaking to one of the leaders. I am aware that the young people will be sleeping in assigned sleep groups separated by gender. I fully expect to be notified if my child is disrespectful or uncooperative. My child is fully able to care for him/herself independent of any assistance however she/he has the following health condition or is in need of the following diet or medication: \_\_\_\_\_

If medical attention is required in the course of the weekend, I hereby give permission for my son/daughter to be treated. I furthermore completely absolve and release St. Bartholomew the Apostle Parish or any individual helping on this retreat from any legal or financial liability related to my child's participation in this weekend.

Parent Permission Signature \_\_\_\_\_ Date \_\_\_\_\_

Insurance Company \_\_\_\_\_ Insurance#/Group ID \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Home Phone \_\_\_\_\_

E-Mail Address \_\_\_\_\_ Cell Phone \_\_\_\_\_