I, the parent of	request my child be allowed to participate in the reing a minor, I hereby release and agree to hold harmless Mount Tabor Center sons connected with the retreat from any liability, claims or damages for personal which may result during the retreat. I consent to the use of likeness in any manner in any media. My child agrees to abide by the rules established for the SPIRITUS consible for transportation to and from this retreat.
Signed this day of	, 20
(Signature of Parent)	(Signature of Participant)
I authorize the treatment, administration in the event physician(s) are unable to contact me. Within the hospital or employed by the rendered in the physician's office. I relipersonnel for performing medical proceproviders deem necessary for my minor	
Signed this day of	, 20(Signature of Parent)
I give permission for my child to particip participant and abide by the rules estal	mpleted for a student attending a virtual retreat) Date in the SPIRITUS virtual Confirmation retreat. My child agrees to be an active blished for the SPIRITUS Confirmation Retreat. Breaks and lunchtime are built need to attend the entire retreat to be considered to have attended the retreat.
	bmit completed form and payment to:

Mount Tabor Center

522 Second Street Menasha, WI 54952

Call Annette Hovie at 920-722-8918 x 0 for more information.

Registration deadline is the Monday prior to the retreat of your choice.

Retreat space is limited.



Small Parish and Open Confirmation Retreats



Held at Mount Tabor Center
One Day Retreats
9 AM - 5 PM
Cost: \$40 per student
March 21, 2021

Overnight Retreats
10 AM - 10 AM
Cost: \$65 per student
February 13-14, 2021

Virtual Retreats (Via Zoom)
9 AM - 3 PM
Cost: \$25 per student
November 7, 2020

An exciting retreat where you can connect with Jesus and others who are on the Confirmation journey.



## FAQ's

#### Where is the retreat being held?

Mount Tabor Center 522 Second Street Menasha, WI 54952

Directions to Mount Tabor can be found on our website at: www.spiritusministries.org/mtc-directions

#### How do I know I am registered for this retreat?

You will receive an email confirming your registration.

#### How do I get to the retreat?

Students are responsible for their own transportation to and from Mount Tabor Center. Free parking is available.

#### What should I bring with me?

All you need to bring is an open heart. For an overnight retreat, students should also bring a change of clothes, personal toiletries and a sleeping bag/blanket.

#### Electronic devices are not permitted on retreat.

Students are asked to set aside cell phones and electronic devices for the duration of the retreat. SPIRITUS Missionaries will collect devices at the beginning of the retreat and return them when the retreat is completed.

#### How can I be reached during the retreat?

In the event of an emergency, your family can reach you at this number: (920) 385-1576 -- day of retreat ONLY

### Should I bring food with me?

All meals are provided by Mount Tabor Center. You may bring a snack if you wish. All food and beverages must be kept in either the kitchen or dining room; not bedrooms.

Gluten-free bread, peanut butter and jelly are available at every meal. If you have special dietary restrictions, feel free to bring food with you. A kitchen is available for storing food items. Appliances are also available if needed.

Will I be attending Sunday Mass during the retreat? Yes, Mass will be part of your retreat.

# SPIRITUS Ministries Confirmation Retreat Registration Form and Permission Slip

Check the retreat of your choice.

Day Retreats 9 AM - 5 PM Cost: \$40 per student Includes retreat and lunch Virtual Retreat via Zoom 9 AM - 3 PM Sunday, March 21, 2021 Cost: \$25 per student Includes retreat Saturday, November 7, 2020 Overnight Retreats 10 AM - 10 AM Cost: \$65 per student Includes retreat, 3 meals and overnight accommodations Saturday-Sunday, February 13-14, 2021 PLEASE COMPLETE ALL PARTS OF THIS FORM STUDENT INFORMATION Student's Name:\_\_\_\_\_\_ Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_ Home Parish: \_\_\_\_\_ City of Parish: \_\_\_\_\_ Grade: \_\_\_\_ EMERGENCY CONTACT INFORMATION Parents (s) Name:\_\_\_\_\_ Home Phone: Cell Phone: E-mail for confirmation of your registration and Zoom link for virtual retreats: (Zoom link will be sent the week of your child's retreat.) MEDICAL CONCERNS

Please list any medical conditions, allergies or dietary needs which would affect your participation in this event.

\*Parishes with 8 or more students are required to provide a chaperone.

Complete back side of this form