

The COR Youth Retreat

COR: Latin word for *heart*

Christ in Others Retreat

A weekend retreat for:

Self discovery	Making new friends
Healing relationships	Encountering Christ
Reviving one's faith	Rejoicing in one's goodness!

COR IS:

A weekend retreat: participants may not leave the retreat, either temporarily or early once they arrive

A youth retreat: it is designed for young people 15 years of age and older.

Young adults or college students may also participate.

A Catholic retreat: non-Catholics are welcome, too!

The 2010/2011 COR retreat schedule is as follows:

January 15-17, 2010	January 14-16, 2011
April 16-18, 2010	April 15-17, 2011
September 17-18, 2010	September 16-18, 2011

at the St. Leonard Youth Retreat Center
4076 Case Road
Avon, OH, 44011

The retreat begins at 9:00pm on Friday and ends at approximately 8:00pm on Sunday.

There is a \$50.00 registration fee. Please make checks payable to:

The Congregation of St. Joseph

(for those who are experiencing financial difficulty, partial scholarships are available)

Contact person: Molly Smith (440)320-9353 or msmithslyrc@gmail.com

Please contact Molly for the registration deadline!

What to bring:

Comfortable everyday clothing	A set of dress clothes
Personal hygiene items	Soft drinks/snacks to share
Sleeping bag/pillow and towels	Boots; seasonal/outdoor clothing

What not to bring:

Radio, cd's, i-Pod's, cell phones...	illegal drugs
Alcoholic beverages	cigarettes, tobacco, money

COR REGISTRATION FORM

Nature of the event:

The COR RETREAT is a Catholic Youth Weekend Retreat held on the grounds of the St. Leonard Youth Retreat Center and sponsored by the Congregation of St. Joseph.

Nature of risks:

I understand that voluntarily traveling to the COR RETREAT, participating in the various activities connected with it and returning home from it, may involve certain risks beyond the reasonable control of the Congregation of St. Joseph, the COR RETREAT organizers, leaders and agents, including, but not limited to, accidents, emergencies, exposure to reckless conduct of other persons. I understand that the Congregation of St. Joseph disclaims any and all responsibility for such risks.

Registration

Name _____ Phone _____

Address _____ City _____ ZIP _____

E-Mail _____ Emergency # _____

School you attend _____ Your Age _____

Name of Parents / Guardians _____

Dietary needs/allergies _____

Waiver of Liability

By signing this Liability Waiver I agree and acknowledge that I may be giving up important legal rights and remedies available to myself, my family, my heirs, successors, and assigns (“Our Behalf”). I agree on behalf of myself, my child’s other parent if known or living, my child named herein and Our Behalf to assume all risks and hold harmless and defend the Congregation of St. Joseph and the organizers and agents of the COR RETREAT with respect to any and all actions, claims or demands arising out of or in connection with travel to and from or attendance at the event, or any other activity my child may engage in while at the COR RETREAT., and I agree to compensate the Congregation of St. Joseph and its agents for reasonable attorney’s fees and expenses arising in connection therewith.

Medical Release

In the event of injury or illness to my child /to myself during the duration of the COR RETREAT, and reasonable attempts to contact me or another person at the above numbers having proven unsuccessful, I hereby give my full consent for the administration of emergency medical treatment deemed necessary by a licensed physician or dentist. This authorization does not cover major surgery unless the medical opinion of two other licensed physicians or dentists, concurring on the necessity for such surgery, are obtained prior to the performance of such surgery.

Permission

Based on all the foregoing, I grant permission for my child / myself to participate in COR RETREAT on _____ at the St. Leonard Youth Retreat Center in Avon, OH. I fully understand the consequences of and sign this Waiver of Liability, Medical Release and Permission knowingly, freely and willingly. I also consent to have pictures of my child / of myself used for the COR website or other COR Retreat promotions.

Signature of Parent or Guardian _____ Date _____

Signature of Participant, if 18 or older _____ Date _____