

SKY ALL MEMBER RETREAT Registration Form

- **When:** Friday, May 13, starting 8pm – Sunday, May 15, ending with the 11:30am Mass at St. Kieran
- **Where:** Skyline Retreat Center in Almont, MI
- **Who:** The SKY New Member Retreat is open to any and all high schoolers
- **Cost:** \$65

TO REGISTER YOUR TEEN FOR RETREAT...

- Please sign and return this entire form by **May 1**. It can be returned to the front office, given directly to Austin Schneider, or can be emailed to Austin at austin@stkieran.org
- Please pay the retreat cost of \$65 by **May 1**. Because a final headcount must be submitted to the retreat center in advance, there will be *no refunds* of money after May 1. Cancellation must be communicated to Austin before May 1 to receive a refund.
- Payment can be made in 3 ways:
 1. Online through St. Kieran's E-Giving (<https://stkieran.weshareonline.org>)
 2. Cash
 3. Check made payable to “St. Kieran Catholic Church”

If paying by cash or check, please put cash/check in an envelope with teen’s name on it and “ATTN Austin Schneider”. This can be given to the front desk or to Austin directly.

In case of financial difficulty, please contact Austin Schneider (austin@stkieran.org). We do not want cost to ever prevent a teen from being able to participate!

Basic Information

Teen’s first and last name: _____

Teen’s cellphone number: _____

Teen’s email: _____

Parent/Guardian’s email: _____

Teen’s food allergies (if any)? _____

PARENT PERMISSION FORM FOR CHILD’S PARTICIPATION IN PARISH ACTIVITY

Dear Parent or Legal Guardian:

Your child is eligible to participate in a catechetical or youth ministry sponsored activity requiring transportation to a location away from the parish premises. This activity will take place under the guidance and supervision of employees and volunteers from St. Kieran Parish. A brief description of the activity follows:

Name of Event: **SKY All Member Retreat**

Destination: **Skyline Retreat Center (Almont, MI)**

Designated Supervisors of Activity: **St. Kieran Youth Ministry Team**

Date and Time of Departure: **Friday, May 13, 2022 (parents drop off teens to retreat center by 8:00pm)**

Date and Time of Return: **Sunday, May 15, 2022 (parents pickup teens from retreat center by 10:30am, arrive back at St. Kieran so we can attend the 11:30am Mass together)**

Method of Transportation: **Parents drive teens**

Cost: **\$65.00**

If you would like your child to participate in this event, please complete and return this entire form and submit payment to the parish by May 1, 2022

STATEMENT OF CONSENT

I hereby consent to participation by my child, _____ in the event described above scheduled for **May 13-15, 2022**. I understand that this event will take place away from the parish grounds. I further consent to the conditions stated above on participation in this event, including the method of transportation.

In consideration of my child being allowed to participate in this event, I agree to indemnify and hold harmless St. Kieran 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 St. Kieran Parish to obtain necessary medical treatment for my child in case of illness, injury or accident. My child has the following medical conditions or allergies about which a health care provider should be told: _____

During this event I can be reached at () _____ or () _____

Print Parent’s Name

Parent’s Signature

Date

Please return pages 1-2 completed, page 3 is for your information.

Name of Event: **All Member Retreat** Destination: **Skyline Retreat Center (Almont, MI)** Group: **SKY**

Method of Transportation: **Parents drive teens**

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CONTACTS:

Before the Retreat

For information or questions, email:

austin@stkieran.org

During the Retreat

If you need to contact Austin Schneider (youth minister), call:

(586)-242-0980

WE ARE AT:

Skyline Retreat Center

5650 Sandhill Rd.

Almont, MI 48003

(810)-798-8240

KEEP THIS PAGE FOR YOUR INFORMATION!!!