

Candidate Name (PRINT) _____



Kairos Retreat 143 - Student Candidate Application

Tuesday, October 24, – Friday, October 27, 2017

Dear Parent(s)/ Guardian(s)-

Your son is invited to participate in Brother Rice High School’s Kairos retreat program. The word “Kairos” means “the Lord’s time.” It is a special time which extends from 3:30 PM on a Tuesday until 5:00 PM the following Friday evening and is spent at the Port in Frankfort. Bus service is provided. It is essential the persons who attend come with the basic desire to listen and participate. With that understanding, this application is an invitation and should not represent undue pressure on anyone to attend. (Participation in a Kairos retreat is not a graduation requirement. Please consider whether or not your son can afford to be away from classes at this particular retreat time.) **PLEASE NOTE:**

- 1) Academic standing, discipline record, and school attendance are weighed before final candidate approval, and
- 2) Unless you hear from Mr. Augustyn, you are accepted and will be contacted with further directions 1 week before leaving.

PARENT INFORMATION- PLEASE READ CAREFULLY! PERMISSION, LIABILITY RELEASE, & PAYMENT OBLIGATION STATEMENTS:

I hereby request that my son participate in the KAIROS retreat, and I also request that my son make use of the transportation supplied by Brother Rice High School. I release Brother Rice High School, its employees, and its volunteers from any liability and waive any claims against them. I understand that KAIROS is a school sponsored event and that all school rules and policies, as stated in the *Brother Rice High School 2017-2018 Crusader Handbook and Planner*, apply while my son participates in this experience. In particular, the use of any tobacco products, alcohol, or drugs in any form not prescribed by a physician is strictly prohibited. Parents will be notified and required to pick up any students found in violation of this policy, and the violation will be reported to the Dean of Students for further disciplinary action. In particular, by Illinois state law and retreat center regulation, no smoking is permitted within the retreat center. Violations of the smoking policy will result in a fine assessed to any rooms where evidence of smoking is discovered, and all fines will be the responsibility of those assigned to the room.

I understand that this application form must be returned to the Campus Ministry Office by Thursday, October 12, 2017 with a down payment of \$150.00. Retreats are FIRST COME--FIRST SERVED so get application and down payment in early.

The total retreat cost - \$285.00- covers all costs for use of the retreat center, accommodations, nine meals, materials, and transportation to and from the retreat center. Balance of \$135 due by October 23rd.

Please watch your E-mail for further participation information in the weeks before the retreat

(Check your spam folder also- sometimes the message ends up there depending on your E-mail settings).

If you do not receive the E-mail, or for further questions about payment and/ or the retreat itself, contact Mr. Joe Augustyn- Campus Minister- at (773) 429-4300 ext 142 or E-Mail jaugustyn@brrice.org.

Parent/ Guardian Signature(s): _____ Date: _____

PLEASE PRINT & COMPLETE ALL INFORMATION on application and Field Trip form CLEARLY & CAREFULLY

Student Name: _____ Name for name tag: _____

Year in School: _____ Theology Teacher Name _____ Period : _____ Room: _____

Home Phone Number: (____) _____ - _____ Primary Language Spoken at Home: _____

Student Cell Phone Number: (____) _____ - _____ Student E-mail _____

Father/ Guardian Full Name: _____ E-Mail Addresses: _____

Work Phone: (____) _____ - _____ Cell Phone: (____) _____ - _____

Mother/ Guardian Full Name: _____ E-Mail Addresses: _____

Work Phone: (____) _____ - _____ Cell Phone: (____) _____ - _____

DO NOT TURN IN SLOPPY OR INCOMPLETE APPLICATIONS (Turn in field trip permission form as well)