** Basic Christian Community of Hawaii Youth Spirituality Retreat**

**Application**

**Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_( ) male ( ) female**

**LAST Name, First name month (00) / day (00) / year (0000)**

**Birthdate (must be 14 years old and not older than 18 years to attend the retreat) \_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­\_\_\_\_\_\_\_\_\_**

**Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone (home) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (work) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Religion\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Church \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sponsor or Invited by\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Do you require medical attention? ( ) no ( ) yes—if yes, please describe (i.e., physical handicaps, medications/#mg, quantity to take/when, what it is used for) \**Note: we are not allowed to administer prescription drugs***

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**Do you have a special dietary need or restriction? ( ) no ( ) yes—If yes, please describe**

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**In case of an emergency, whom do we notify: Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Medical Plan\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Preferred hospital \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Retreat Date attending\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Retreat held at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent/Guardian- If your child is younger than 18 years, please read, initial and sign below**

\_\_\_\_\_ I will not hold the Basic Christian Community of Hawaii (BCCH) liable for any injury or illness my child may incur during the retreat. Note;:BCCH will see to it that your child will receive proper medical attention, and you will be notified,( if necessary).

\_\_\_\_\_ I understand my child must attend the entire retreat from Friday evening to the closing of the retreat on Sunday. I also understand that if my child should leave for any reason during the retreat, he/she will not be able to return to complete retreat. (Note: If this retreat was a confirmation requirement and they leave the retreat, it will not be counted as attending a retreat.)

\_\_\_\_\_ If for any reason my child does not, in any way, follow the guidelines given, I agree to have him/her sent home. (Note: The emergency contact on this application will be called to pick your child.)

\_\_\_\_\_ I understand that a Pro Life slide presentation showing the consequences of abortion will be viewed. (Note: Following the presentation, there will be an open discussion on the church’s view concerning love, sexuality and marriage. Our Goal is to help your teen choose a lifestyle that is compatible with Scripture and our Catholic tradition.)

**Check one: My son/daughter ( ) may ( ) may not view the slide presentation.**

I understand that according to the teachings of the Roman Catholic Church receiving communion is linked with being in communion with the Pope and the Pastors of the church. Those who receive Holy Communion at a Catholic Mass not only receive the body and blood of Jesus Christ but also publicly express their unity with the pastors of the Roman Catholic Church. Therefore, Catholic sacramental communion is only open to those who believe that the Eucharist is the Body and Blood of our Lord and who are united with the pastors of the Catholic Church.

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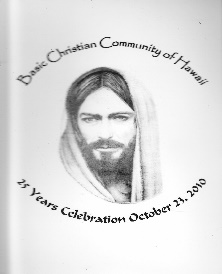
Print name signature date

Turn check/application in to your sponsor or send to (***no later than two weeks prior to retreat weekend***): Sterling Rosa

45-265 Wm. Henry Road, #F-7

Kaneohe, HI, 96744

Cost of retreat**: $80**. Make checks payable to: **Basic Christian Community of Hawaii. Application due ASAP and no later than one week prior to retreat weekend.**

 **Basic Christian Community of Hawaii Youth Spirituality Retreat**

**Praise God!** We welcome you as a participant to the Basic Christian Community of Hawaii (BCCH) Youth Spirituality weekend. All we ask is that you come to the weekend with an open heart and mind, and the Lord will give you new insight into your life with Him and your place in the Christian community.

Participants will be accepted on a first come-first served basis, so get your application in early. A donation of $80 covers the cost of all meals, snacks, writing material, room and board: the donation is tax deductible. Partial and full scholarships are available to those in need.

We will be praying for your safe arrival on **Friday evening of the retreat at 5:00 pm.** A light meal will be served.

**Please bring the following items with you:**

**1. Toiletries (toothbrush, toothpaste, soap, etc.)**

**2. Bath towel**

**3. Casual clothing, sweater/jacket. (Dress Code- Girls- no shorts, short skirts, spaghetti straps, shirts showing mid drift, see through tops…. Boys- No T-Shirts showing inappropriate language or visuals, no pants/shorts hanging below hips, no wearing of hats indoors.**

**4. Comfortable shoes/slippers**

**5. Umbrella/flashlight (optional)**

**6. Aloha attire for Sunday Mass**

**7. Blankets & Pillow provided, but you may bring your own if you wish.**

**Please DO NOT bring**- cell phones iPods, cameras or any electronics. (Telephones will be available for emergency use).

**The Spirituality Retreat will be held on**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**at** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

We are scheduled to complete the weekend with the **Celebration of Mass** at approximately **2:00 pm on Sunday.**

Family & Friends are welcome to join us for Mass. Please come one hour prior to Mass for the final talks. The retreat will end approximately 3:30 pm.

**Questions?** Please email Sterling Rosa at: [musicman96744@yahoo.com](mailto:musicman96744@yahoo.com) or call him at (808) 554-0888