

YOUTH 2000 RETREAT REGISTRATION

REGISTRATION FEE: \$60.00

* Includes lunch and dinner on Saturday -does NOT include housing *

Please complete and send the online or paper **registration form, \$60.00 Registration Fee** (checks payable to "St. Mary and St. John the Baptist Parishes") and completed **Liability Release Form** below **by April 10th, 2023** to:

*St. Mary and St. John the Baptist Parishes
attn: Bethany Doll
528 2nd Street
Menasha, WI 54952*

Registration Form

***please note if you are a parent attending with ONLY your child – you are exempt from certain requirements**

All youth ministers and chaperones coming with a group, and all of the volunteers helping with the YOUTH 2000 Retreat MUST submit the following documents to the Sponsoring Party Registration Committee prior to the Retreat. No exceptions. Those arriving at the Retreat without the following documentation will not be admitted.

Youth Ministers, Chaperones and Volunteers must send in:

- The signed and completed YOUTH 2000 Retreat Registration and Liability Release Form

- A letter on appropriate letterhead or documentation from your parish or diocese stating that you are in compliance with all Safe Environment requirements pertaining to the *Charter for the Protection of Children and Young People*.

Attach the letter to your completed Registration and Liability Release Form

Parents attending with ONLY their children, do not need to send documentation of compliance with Safe Environment status. It IS needed IF also chaperoning other youth.

There must be one adult chaperone for every eight youth, age 17 and younger, in your group.

_____ Number of youth in your group, ages 13-17, attending the YOUTH 2000 Retreat

_____ Number of youth in your group, ages 18-25, attending the YOUTH 2000 Retreat

_____ Number of chaperones attending the YOUTH 2000 Retreat with your group

Names and email addresses of adult chaperones for your group

(to be completed by the youth minister/chaperone in charge of the group):

1. _____
2. _____
3. _____
4. _____

Name and email (of main chaperone contact) _____

Circle one: *youth minister *chaperone *volunteer *parent attending with child

Home phone number: _____

Cell phone number: _____

Address: _____

City, State: _____

Zip code: _____

OVER 

Parish Name _____

City _____ State _____ Zip _____

Phone Number of Parish (_____) _____

Participant Information

Participant Name	Participant Age	Participant Sex	Any food or other allergies?
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

For Registration Committee Use Only

Liability Form Received: Yes _____ No _____

Payment Received: Yes _____ No _____

Compliance letter received: Yes _____ No _____

(not required for a parent who attends with their child, only)

Received by (Registration Committee Volunteer name): _____