

APPLICATION FOR SENIOR RETREAT

NAME _____ MALE _____ FEMALE _____

ADDRESS _____ ZIP _____

HOME PHONE _____ CELL PHONE _____

SPORTS YOU PLAY AT SCHOOL _____

PLEASE FILL OUT COMPLETELY

MOTHER'S NAME AND ADDRESS _____

_____ ZIP _____

PHONE (HOME) _____ CELL _____ WORK _____

FATHER'S NAME AND ADDRESS _____

_____ ZIP _____

PHONE(HOME) _____ CELL _____ WORK _____

RETREAT DATES (CHECK ONE)

NOVEMBER 12TH - 15TH _____ JANUARY 7TH - 10TH _____

(BEGINS 6 P.M. TUESDAY AND ENDS 7 P.M. FRIDAY)

COST - \$160.00

There is a non-refundable application (deposit) of \$80.00 due with this form. The total cost is \$160.00. Final payments are due 10 days before the retreat begins. Unless arrangements have been made. You can pay in full if you wish.

Check one: Enclosed is the deposit fee - \$80.00 _____

Enclosed is the entire fee - \$160.00 _____

Please enclose the application and fee in an envelope and bring it to Sister Maryann

Student Signature _____

In consideration of the making of arrangements for the retreat by Holy Cross High School, I hereby release and save harmless, Holy Cross High School and any and all personnel of said school, from any and all liability and for any injuries, loss, or other claims arising out of or resulting from this retreat.

Parent Signature _____