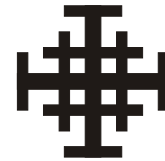


Kairos Application

Student Agreement



Thank you very much for expressing interest in attending North-side Kairos 7. We are very excited about you being with us for the weekend. Before filling out this application, double check your schedule to make sure that you are available for the retreat. The retreat will begin at 5:00 PM on Friday August 1, 2006 and you will not return until Monday August 14 in the evening. Then, please talk to one of the coordinators listed on the reverse side to express interest and reserve a space.

All participants must abide by the rules of the retreat:

RULES: During Kairos you are expected to participate in all the group activities and respect the property of Belarmine retreat house, not to leave the retreat grounds and make phone calls only with permission of the Retreat Coordinators. You are asked to not bring cell phones, beepers, TVs, or walkman to the retreat. You are also required to abstain from alcoholic beverages, any illegal drug, and sexual intimacy during the retreat.

I HEREBY AGREE TO ABIDE BY THE RULES OF THE WEEKEND:

Student Signature _____

Date: _____

Name: _____

Birth Date: _____

Address: _____

E-mail: _____

School Attended _____

Home phone number: _____ Year of School Completed: _____

Alternate phone number: _____ Languages spoken: _____

Parent/Guardian: _____ Parish: _____

Parent/Guardian work number: _____ Religion/Denomination: _____

Other Parent/Guardian: _____

On a separate piece of paper, please write a paragraph or two and answer the following questions. These are not application questions, they are merely use to inform the Kairos team a little about you so that we can prepare to serve you better . Only the team will read your responses.

How did you find out about the retreat? What do you hope to gain from the retreat? What is your relationship, if you have one, with your friends your family, and/or God? Do you have any special concerns you would like the team to know about?

Kairos Application

Parental Permission Form

The following are statements are confirmed by the signature of the parent/guardian of _____.

It is understood that Kairos will take place at Bellarmine retreat house and that my child will be under adult supervision. The conditions of the activity including departure, return, and, bus ride are understood and accepted.

It is understood that the staff of Bellarmine retreat house, the sponsoring and participating parishes, their staffs and volunteers, and the Catholic Bishop of Chicago, a corporation sole, are released and indemnified from any and all liability arising from claims of any kind or nature whatsoever from my child's participation in this event.

It is understood that if in the event of an emergency, when the emergency contact cannot be reached, nor the authorized physician of the child, and in the judgement of the retreat coordinator or other responsible person accompanying the retreat, there is a necessity for immediate examination and/or treatment of my child, the afore-said personnel have the authority to obtain for the child such medical services as are deemed necessary.

Signature of parent/guardian _____ Date _____

Emergency contact from August 11 to 14: _____

Emergency contact's phone number: _____

Medical conditions/allergies: _____

Medications taken: _____

Doctor's name and phone # _____

Insurance policy number: _____

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You should contact one of the Retreat Coordinators listed below to reserve a space immediately. Verbal reservations must be accompanied by a written application by July 1. The cost of the retreat is \$175 dollars for parishoners of St. Nicholas, St. Ignatius, or St. Athanasius parishes or \$190 for any other youth. A non-refundable \$50 deposit is required when turning in this application. Scholarships to Kairos are available but must be arranged in advance of making the \$50 deposit. Please mail applications to David Heimann, c/o St. Ignatius Parish, 6559 N. Glenwood, Chicago IL 60626.

Retreat Coordinators:

Michael Doyle	847-864-1185
Christie Thompson	847-328-1430
David Heimann	773-764-5936