

THE PRESENCE KALAMAZOO February 10, 11 & 12



WELCOME

- High School students grades 9th - 12th
- Chaperones
- Volunteers

COST

- \$80 per person
- Registration closes January 27.
- No late registration excepted after January 27, for real.
- Make checks payable to: Hackett Catholic Prep

WHERE

- Hackett Catholic Prep High School* located at 1000 West Kilgore Rd., Kalamazoo, 49008.
- Guys sleep at Crowley Center located at 542 W. Michigan Avenue, Kalamazoo, 49007. Busses are provided to transport guys to and from the Crowley Center.

*Address for Hackett Catholic Prep is for mapping/direction purposes only. Any questions or comments are to be directed to The Presence Committee - 269-903-0139 or TMcNamara@diokzoo.org. Please do NOT call Hackett with questions in regards to the retreat. Do NOT mail forms to Hackett.

WHEN

- 7:00 pm, Friday, February 10 through 1:00 pm, Sunday, February 12.
- All students and chaperones are required to stay on the premises the entire retreat.
- Students cannot leave the premises and reenter under any circumstances.
- Chaperones are required to stay with students the entire retreat, 7:00 pm Friday - 1:00 pm, Sunday. All day and all night.

No late arrivals such as planning to arrive at 10:00 pm after or during the day on Saturday. Participants cannot leave to attend another obligation and come back.

MEALS

- Snack served at 10:00 pm Friday.
- All Saturday meals will be provided. Delicious.
- Breakfast served Sunday.
- Please list on the Medical Form any dietary requirements.

CLOSING MASS

- Parents and families welcome!
- Sunday - 11:00 am

CHECK-IN

- Friday 6:00 pm - 7:00 pm
- No late arrivals, except circumstances beyond our control, getting lost, car trouble, weather etc.
- Balance must be paid in full and all required documents already submitted to The Presence.
- Send a CHAPERONE to registration desk to confirm attendees and pick up name tags.
- Each participant will be provided a large industrial bag to put all belongings in.

SLEEP AREAS

- Every group is required to have a chaperone(s) of the same gender.
- Girls sleep at Hackett in classrooms on the floor.
- Boys will be transported to the Crowley Center to sleep on the gym floor.
- PLEASE tell your people they are sleeping on floors. Bedding, mattresses or pads are not provided.
- Bring an air mattress (don't forget batteries) or a cot.

SHOWERS

- Girls will use the Girls Locker room at Hackett and will have access at night and morning.
- Boys will use the Boys Locker room at Hackett and will have access only in the morning for showers.
- Boys will be sleeping at the Crowley Center and will have access to restrooms but there are no showers at that facility.
- Suggesting boys bring a small bag or cinch sack for toiletries & clothing for shower. Once students return to Hackett for showers they will not be able to get back to the Crowley Center.

PACKING LIST

- Sleeping bag
- Pillow
- Air mattress, batteries and pump
- Towel
- Toiletries
- Cinch Sack
- Comfortable change of clothes
- Kneeler pad/bleacher seat cushions
- Rosary
- Showers are open "locker room style" bring bathing suit, if desire.
- Band will have items for sale and possible mini book store \$.
- All medications must be carried by the Group Leader or Chaperone.

ATTIRE

- Please dress comfortably with indoor attire.
- In general, we ask that participants dress in accordance with a general sense of Christian decency.
- No spaghetti straps, short shorts or skirts please

CELL PHONES

- Cell Phones or any other electronic devices are not allowed while program activities are in session.
- Devices will be confiscated and returned at the end of the weekend.
- The Presence is not responsible for any lost items.

REGISTRATION

- Mail all forms together. Mail them as a group.
- **Mail forms & fees to: The Presence, c/o Tim McNamara, 215 North Westnedge Ave., Kalamazoo, MI 49007**
- Make checks payable to: Hackett Catholic Prep School*
- Mail the three student registration forms **signed** per student.
- Mail Chaperone registration form. Be sure chaperones are Virtus certified and have a current CBC.
- Requirements for adults to student ratio: 1 to 8 students bring 2 adults, for every additional 8 students add 1 adult.
- \$80 per person.
- Registration closes January 27.

*Hackett Catholic Prep is for banking and site purposes only. Registration forms & fees mailed to The Presence, c/o Tim McNamara, 215 North Westnedge Ave., Kalamazoo, MI 49007. Please do NOT mail forms to Hackett.

MEDICATIONS

- The Presence volunteers will NOT dispense medication during the retreat.
- Chaperone's are responsible to dispense medication to their students.
- Advised to make a copy of the filled out Student Medical Form for your needs.
- View Diocesan Policy for Student Medications on our website www.thepresencekalamazoo.org.

Who is Who?

STUDENT...

- 9th - 12th grader
- Not an 8th grader. Sorry, no exceptions.
- Committed to arriving by 7:00 pm on Friday and staying until 1:00 pm Sunday.
- Someone who understands with the exception of an emergency, they cannot leave the premises during the retreat.
- Cannot leave to attend another event and return to the retreat.



GROUP LEADER...

- Person in communication with The Presence Committee.
- Responsible to communicate information and policies with Chaperone and Students.
- Responsible for verifying Chaperone Virtus certification and Criminal Background Check.
- Responsible for maintaining adult to student ratio: 8 total students = 2 adults, for every additional 8 students add 1 adult.
- Does not have to attend, but must be available by phone during the retreat.

CHAPERONE...

- 21 years and older, Virtus certified with a current Criminal Background Check.
- Must stay with students the entire retreat, 7:00 pm Friday - 1:00 pm, Sunday. All day and all night.
- Aware of the students in their group and student whereabouts during the retreat.
- Prepared to lead small groups.
- Aware of medical needs of students, properly dispense meds to individuals in the group.
- Required to stay on the premises the entire retreat.
- Cannot leave to attend other obligations and return.
- The Presence Committee cannot secure chaperones for your group.

VOLUNTEER...

- 18 years and older, Virtus certified with a current Criminal Background Check.
- Volunteer form submitted by February 3.
- Perform duties required for volunteer position.
- Not responsible for students.
- Meals not provided.
- No fee for volunteering.

QUESTIONS?

- Contact The Presence team at 269-903-0139 OR email at TMcNamara@diokzoo.org

We look forward to welcoming you to The Presence!

The Presence Committee

Office: 269-903-0139

E-mail: TMcNamara@diokzoo.org

website: thepresencekalamazoo.org

- Last-minute or other cancellations will not have their registration fee refunded.
- If a student cancels after your group has registered, you can fill that spot with another student. Call 269-903-0139 or email TMcNamara@diokzoo.org to make the change.
- A fine will be issued to the Group if any one person in the group damages property.
- Hackett Catholic Prep is for banking purposes and retreat site only. Do NOT mail forms to Hackett or call Hackett with retreat questions.
- Make checks payable to: Hackett Catholic Prep.
- Mail Registration forms & fees to: The Presence, c/o Tim McNamara, 215 North Westnedge Ave., Kalamazoo, MI 49007.

Hackett Catholic Central

Not to Scale

Adult Bathroom

107

108

109

Alumni Hall

67

68

77

79

Sophomore Hall

Auditorium

Music

Foyer

Boys Shower

Student Bathrooms

GYM

GIRLS SHOWER

Junior Hall

72

74

84

COURTYARD

91

90

89

88

Senior Hall

General Offices

LIBRARY

Entrance to Girls shower

Freshman hall

80

112

111

110

81

82

83

86

87

Student Bathroom



CHAPEL

Guidance Office

Hospitality ROOM

Cafeteria

Group Leader

Group: _____ Group Leader: _____

Group (Parish or Youth Group) and Group Leader Name is the same on every form in your group.

Group Leader Cell Phone: _____ Group Leader Email: _____

____ Yes, I have reviewed the Information Packet.

____ Yes, I have reviewed the Information Packet with Chaperones and Students.

____ Yes, I have read and understand the diocesan policies and guidelines for administering medications to students.

_____ Group Leaders Signature

Presence Committee at: 269-903-0139 | TMcNamara@diokzoo.org | 215 North Westnedge Ave., Kalamazoo, MI 49007

Here's what you do:

- Put the Group Name, Group Leader, Cost, Return Address (so you can collect forms) and Due Date on the Chaperone form and all 3 Student forms **THEN** make copies.
- Make your due date at least one week before our drop dead due date of January 27.
- The correct adult to student ratio:
8 total students = 2 adults
Every additional 8 students add 1 adult.
- After students fill out Med Forms, make copies so you know who you have to give meds to.
- Collect all forms and send all forms together to:
The Presence
c/o Tim McNamara
215 North Westnedge Ave.,
Kalamazoo, MI 49007
- Send all forms together as a Group.

Chaperone

Group: _____

One Group name. **The same name on every form in your group.**

Group Leader: _____

One Group Leader name. **The same name on every form in your group.**

Cost: _____ Make Checks Payable to: _____

Due Date: _____

Return Forms to: _____



Personal Information

Name: _____

Email: _____

Home Address: _____

City: _____

State: _____ Zip: _____

Phone: _____

Male: _____ Female: _____ Age: _____

T-Shirt Size: _____ SM _____ M _____ L _____ XL _____ 2XL

Emergency & Dietary Information

Health Insurance: _____

Policy Number: _____

List current allergies, medications and medical conditions:

Emergency Contact Name: _____

Emergency Contact Phone: _____

List dietary needs/requirements: _____

Chaperone Verification

_____ Yes, I have attended a VIRTUS Protecting God's Children (or equivalent) training.

_____ Yes, I have a completed criminal background check on file with the parish/school in the last five (5) years.

Diocese: _____

Home Parish: _____

If your Diocese does not participate in VIRTUS you must provide a form from your Diocese stating that you have had some equivalent and have had a recent CBC. Without VIRTUS verification or equivalent you will not be allowed on the premises.

By signing this form, I acknowledge that I have read the "Information Packet" and understand the sleeping arrangements and conditions. I have read and agree to abide by all rules and policies as outlined in the Student Code of Conduct.

The undersigned hereby release Hackett Catholic Prep, Crowley Center and The Roman Catholic Diocese of Kalamazoo, and any and all affiliated organizations, their employees, agents and representatives, including volunteer drivers (collectively "Releasees"), from any and all claims, including negligence, which may be asserted by my participation in The Presence Retreat. In the event this release on behalf of myself is held to be invalid or unenforceable, I hereby agree to indemnify and hold harmless Releasees from any and all claims, including negligence, which may be asserted by me arising from or relating to my participation in The Presence Retreat. This release or indemnification does not apply to claims for intentional misconduct or gross negligence; nor does this release or indemnification apply to the extent of commercial insurance coverage for any claim, but this Release or Indemnification shall apply to the extent of any self-insurance or deductible applicable to any claim.

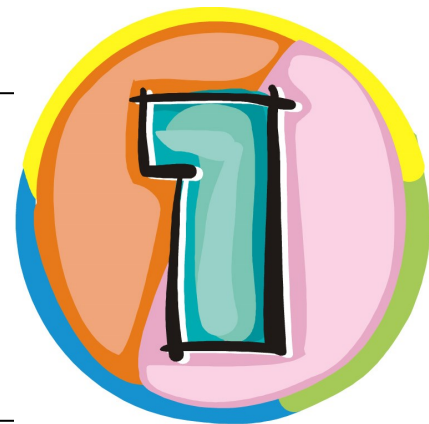
The participant agrees not to transmit, distribute, or sell (or aid in transmitting, distributing, or selling) any description, account, picture, video, audio or other form of reproduction of this event (in whole or in part). The participant grants permission to The Presence and the Diocese of Kalamazoo to utilize the participants image, likeness, actions and statements in any live or recorded audio, video, or photographic display or other transmission or reproduction, in whole or in part, of The Presence Retreat event.

Signature

Date

2017 Student Registration

The Presence Kalamazoo
Retreat for High School Students
www.ThePresenceKalamazoo.ORG



Group: _____
One Group name. **The same name on every form in your group.**

Group Leader: _____
One Group Leader name. **The same name on every form in your group.**

Cost: _____ Make Checks Payable to: _____

Due Date: _____

Return Forms To: _____

Personal Information

First Name: _____ Last Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Birth Date (mm/dd/yyyy): _____ Male: _____ or Female: _____ Age: _____ Grade: _____

T-Shirt Size (select one): _____ Small _____ Medium _____ Large _____ Extra-Large _____ XXL

Parent's Name (First & Last): _____

Home Phone #: _____

I hereby consent to participation by my child, in The Presence Retreat. In consideration of my child being allowed to participate in this retreat, I hereby agree on behalf of myself and my child, to release Hackett Catholic Prep High School, Crowley Center and The Roman Catholic Diocese of Kalamazoo, and any and all affiliated organizations, their employees, agents and representatives, including volunteer drivers (collectively "Releasees"), from any and all claims, including negligence, which may be asserted by me or my child, or on behalf on my child, arising from or relating to my child's participation in The Presence Retreat. In the event this release on behalf of myself and/or my child is held to be invalid or unenforceable, I hereby agree to indemnify and hold harmless Releasees from any and all claims, including negligence, which may be asserted by me or my child, or on behalf of my child, arising from or relating to my child's participation in The Presence Retreat. This release or indemnification does not apply to claims for intentional misconduct or gross negligence; nor does this release or indemnification apply to the extent of commercial insurance coverage for any claim, but this Release or Indemnification shall apply to the extent of any self-insurance or deductible applicable to any claim.

The participant agrees not to transmit, distribute, or sell (or aid in transmitting, distributing, or selling) any description, account, picture, video, audio or other form of reproduction of this event (in whole or in part). The participant grants permission to The Presence and the Diocese of Kalamazoo to publish photos of my son/daughter on the conference website or conference publications for the sole purpose of communicating the activities and programs of the diocese. I understand that only my child's first name will be used if captions are listed with photos.

As a parent/guardian, I do hereby authorize the treatment by a qualified and licensed physician of any condition which, in the opinion of the physician, is deemed necessary and appropriate. This authority is granted only after a reasonable effort has been made to reach me. I further authorize the person who presents the minor to sign the Acknowledgement of Receipt of Notice Privacy Rights that may be presented by the physician or health care facility. This authorization is completed and signed of my own free will with the purpose of authorizing medical treatment deemed necessary and appropriate by the treating physician.

Parent/Guardian Signature

Parent/Guardian Printed Name

Date

2017 Student Medical

The Presence Kalamazoo
Retreat for High School Students
www.ThePresenceKalamazoo.ORG



Group: _____
One Group name. **The same name on every form in your group.**

Group Leader: _____
One Group Leader name. **The same name on every form in your group.**

Cost: _____ Make Checks Payable to: _____

Due Date: _____

Return Forms To: _____

Emergency Information

First Name: _____ Last Name: _____

Parent's Name (First & Last): _____

Home Phone #: _____ Parent's Cell #: _____

Birth Date (mm/dd/yyyy): _____ Male: _____ Female: _____ Age: _____ Grade: _____

Health Insurance: _____ Policy Number: _____

Family Physician: _____ Phone: _____

Emergency Contact Name and Phone #: _____

List current allergies, medical conditions and medications: _____

List dietary needs/requirements: _____

Medications

Please contact your Group Leader for appropriate policies, procedures and forms regarding any medications your child will need during The Presence Retreat. This includes prescription and over the counter medications.

Please note that according to Diocesan Policy students may not transport or carry medications on their own.

2017 Code of Conduct

The Presence Kalamazoo

Retreat for High School Students

www.ThePresenceKalamazoo.ORG



Group: _____
One Group name. **The same name on every form in your group.**

Group Leader: _____
One Group Leader name. **The same name on every form in your group.**

Cost: _____ Make Checks Payable to: _____

Due Date: _____

Return Forms To: _____

Code of Conduct

So that The Presence can provide the best possible retreat experience for all participants, we require that everyone adheres to the following Code of Conduct. Failure to abide by any of the following policies may result in you being BV'd (this stands for "Bon Voyage").

- Be on time for all scheduled actives. Hey, we don't want you to miss anything!
- It is very important that you get the rest you need, so abide by the lights out time in sleep areas.
- No illegal drugs, alcohol, or tobacco products.
- Over the counter meds and prescriptions need to be turned in with Medical Form to your Group Leader.
- No fireworks, lighters, flames or fire.
- No weapons.
- No pornography.
- No fighting.
- No profanity.
- Your Chaperone must know where you are at all times.
- No participant is allowed to leave the school premises without an adult's supervision.
- No skateboards.
- No cell phones while program activities are in session.
- Report all illnesses to your Chaperone.
- Commit to maintaining a positive attitude. Don't worry, be happy!
- Each Group will be responsible for any damage done to the facilities; retreat site and sleep areas and buses.
- Sleep areas must be kept clean and orderly.
- No beverage except water is allowed in the sleep area.

RELATIONSHIPS...

- No romance or pairing off at any time.
- If you are in a dating relationship, be sure to read Theology of the Body for Teens, and put your relationship on hold for the retreat.
- No romantic physical contact. No holding hands. No extended hugs.
- No guy and girl praying alone.
- No guy's in girl rooms.

Parent Signature

Student Signature