

Seminary of Christ the King Trip

Fri, Sept. 30 – Sun, Oct. 2 Mission, BC

Who?

Gr. 8-12 Boys of the N. Okanagan Parishes.



Why?

Most of us have no idea of seminary life. Those who have attended weekend visits are usually PLEASANTLY surprised by their experience!

What?

Tour the abbey, join the seminarians for prayer times, chat with seminarians over lunch, play a soccer or basketball game against the seminarians ... just get a sense of seminary life! We will include some team building at Castle Fun Park in Abbotsford!

Accommodation:

The group will sleep in the seminary's recreation room under the supervision of Mr. David Ziebart (Youth Coordinator at Immaculate Conception) and one other male chaperone who has had his safe environment training, criminal record check and is cleared for ministry in the diocese.

Drop Off: ICC Parking Lot: Friday, Sept. 30 at 9:30 am

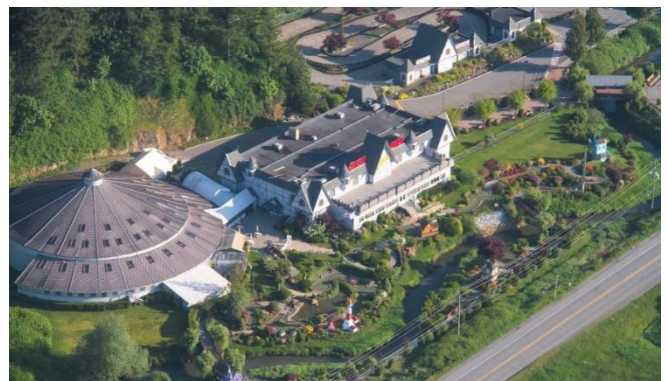
Pick Up: ICC Parking Lot: Sunday, Oct. 2 at approximately 5:30 pm

Registration Fee: \$115.00* (actual cost \$160.00 – reduced due to diocesan subsidy)

Send payment to etransfer.ICC@nelsondiocese.org with your son's name and 'Seminary Trip' in the message box or by cheque (make payable to Immaculate Conception Parish).

Includes ...

- Travel by School Bus
 - 2 Nights Accommodation
 - 6 meals
 - Castle Park Laser Maze & Bowling
- *Some funding may be available from your parish –ask your parish priest!**



Registration Deadline

Forms and payment due at Immaculate Conception **by September 20.**

Questions? Please contact David Ziebart at david@icckelowna.ca 250-762-3910 ext 3

Seminary of Christ the King Trip Registration Form

Please submit **completed registration form** and **payment** by Tuesday, Sept. 20 to Immaculate Conception Church, 839 Sutherland Avenue, Kelowna, BC V1Y 5X4.

First Name		Middle Name(s)	Last Name
Grade	Date of Birth (YYYY-MM-DD)		BC CareCard Number
Home Phone		Parent's Email Address	
Mom's Name		Mom's Cell	
Dad's Name		Dad's Cell	
Alternate Emergency Contact Name (if we can't reach a parent)		Phone Number	
Current BC Medical Coverage? Circle: Yes No		My son has a pre-existing medical condition: Circle: Yes No	
Special Concerns (Dietary, Physical, Medical, Behavioural). Given that this is an overnight trip, please be specific.			

Pastor's Reference:

To the best of my knowledge, this participant gets along well with his peers, is cooperative with adult supervisors, is able to travel without his parents and has the maturity for this trip.

Parish will put \$ _____ towards his registration fees.

Parish Priest: _____ Pastor Signature: _____

Fees: \$115.00 (**minus** parish amount above)

Send payment to etransfer.ICC@nelsondiocese.org with your son's name and 'Seminary Trip' in the message box or by cheque (make payable to Immaculate Conception Parish).

Liability Release / Waiver:

I understand that reasonable precautions will be taken to safeguard the health and well-being of all participants during the Seminary of Christ the King Road Trip. I give permission to the group leader and/or chaperones leading the trip to obtain medical care from a licensed physician, hospital, or medical clinic for my child in the event that I or other legal guardian cannot be reached. I hereby do release and forever discharge the Nelson Diocese, employees and volunteers from all manner of actions arising during my son's travel to/from and attendance at this trip. Unless other written instruction is submitted, I also consent to allowing my son's image to be recorded, either by photograph or video, during travel to/from the seminary and used for future advertisement of the diocesan programs.

Signature of Parent / Guardian