

*Bread of Life / Pan de Vida  
Youth Retreat  
March 26-28, 2010  
Youth Registration Form*



*A weekend for, of, and by  
young people*

*Youth – Ages 14 to 17  
&  
Young Adults – Ages 18 to 30*

*Our Lady of Sorrows  
Parish  
Bernalillo, New Mexico*

*Youth Retreat led by the  
Franciscan Friars of the Renewal!*

*Friday, March 26, 6:00 – 11:00 p.m.*

*Saturday, March 27, 8:00 a.m. – 10:00 p.m.*

*Sunday, March 28, 8:00 a.m. – 12:30 p.m.*

*Inspiring Talks*

*Eucharistic Adoration*

*Lively Music*

*Group Workshops*

*Personal Testimonies*

*Sharing Faith*

## General Information

The *Bread of Life Youth Retreat* is modeled on the YOUTH 2000 Retreat held approximately 40 weekends throughout the year in the US, UK and Canada. This retreat will be hosted by Our Lady of Sorrows Parish, in collaboration with the Franciscan Friars of the Renewal. The retreat will be held March 26, 27 and 28, 2010 at Our Lady of Sorrows in Bernalillo. Youth and young adults are invited. If you have questions after reading the following information, please call the parish office at 505-867-5252 and ask to be transferred to "Youth Retreat" for additional information and voice messaging.

### Registration

The Registration Form and Liability Release are enclosed. All participants, including chaperones, must complete the Liability Release Form. **All forms for participants age 17 and younger must be signed by a parent or legal guardian and must be completed in advance of the weekend.**

Participants who wait to register at the door must have liability release and registration forms signed by parent or legal guardian and will only be allowed entrance if space is available. Space is limited. The registration fee is \$30 per person. Additional donations to help offset the costs are greatly appreciated.

### Location

*Our Lady of Sorrows Parish* is located on 301 S. Camino del Pueblo. (*Directions:* From Albuquerque: I-25 North to exit 242, left off ramp onto Route 550. Take 550 to Camino Del Pueblo, Left onto Camino Del Pueblo. Our Lady of Sorrows is 1/4 mile on the right.)

From Santa Fe: I-25 to Exit 242 right off exit ramp to 550 and make left to traffic light at Camino del Pueblo. Make left onto Camino del Pueblo. Our Lady of Sorrows is 1/4 mile on the right.

### Meals

Lunch, dinner and drinks will be provided on Saturday and lunch on Sunday. Snacks and drinks provided all weekend. The costs for meals and snacks are included in the \$30 registration fee. Leaving the site for meals is not an option.

### Chaperones

There will be one adult chaperone for every seven youth participants under age 18.

### Housing & Transportation

Housing and transportation will not be provided and is the responsibility of each participant. Please note the start and end times on program schedule.

### Promotional Materials

Press Releases and a sample bulletin notice for a Parish Bulletin are available. Please call if you would like a copy. Any part of this brochure can be copied and/or enlarged for promotion of the Retreat.

## Program

### "I Am The Bread Of Life" John 6:35

#### Friday, March 26<sup>th</sup>

5:00 p.m. Doors Open  
6:00 p.m. Registration  
6:30 p.m. Music  
7:00 p.m. Welcome/Introduction and Rosary  
7:30 p.m. Mass with Bishop James S. Wall  
8:45 p.m. Short Break  
9:00 p.m. Talk  
9:45 p.m. Music, Meditation, Adoration  
11:00 p.m. Closing

#### Saturday, March 27<sup>th</sup>

8:00 a.m. Music  
8:30 a.m. Morning Prayer  
9:00 a.m. Talk  
9:45 a.m. Workshops  
10:30 a.m. Short Break  
10:45 a.m. Music, Meditation, Testimonies  
Noon Lunch  
1:30 p.m. Talk/Examination of Conscience  
2:15 p.m. Workshops  
3:00 p.m. Break  
3:30 p.m. Music, Meditation, International Rosary  
4:30 p.m. Mass with Archbishop Michael J. Sheehan  
6:00 p.m. Dinner  
7:30 p.m. Talk  
8:15 p.m. Music, Meditation, Adoration  
9:00 p.m. Eucharistic Procession  
10:00 p.m. Closing

#### Sunday, March 28<sup>th</sup>

8:00 a.m. Music  
8:15 a.m. Morning Prayer  
8:30 a.m. Talk  
9:00 a.m. Rosary  
9:20 a.m. Short Break  
9:30 a.m. Palm Sunday Procession  
10:00 a.m. Benediction/Reposition  
10:30 a.m. Mass  
12:00 a.m. Testimonies  
12:30 p.m. Closing

*Priests will be available for confession entire weekend.*



*Bread of Life relies on private donations. Your donations are welcome to help us meet our needs and expenses. If you would like to make a donation, please make checks payable to Our Lady of Sorrows Parish and mail it to:*

*Our Lady of Sorrows Parish  
Attn: Bread of Life Youth Retreat  
PO Box 607  
Bernalillo, NM 87004*

# *Bread of Life Youth Retreat-- REGISTRATION*

**REGISTRATION FEE \$30.00**

**Please Submit:**

- Completed/Signed Registration Form
  - Completed/Signed Liability Release Form
  - \$30.00 Registration Fee (*checks payable to Our Lady of Sorrows Parish*)
- Registration Deadline: Monday, March 15, 2010**

**Mailing address: Our Lady of Sorrows Parish, Attn: Bread of Life Youth Retreat,  
PO Box 607, Bernalillo, NM 87004**

**Note: You may also drop-off registration package at Our Lady of Sorrows, 301 South Camino del Pueblo, Bernalillo. Parish Office hours: 8:30 am – 4:30 pm M-F.**

## *Liability Release Form Below Must Be Completed By All Participants*

### **LIABILITY RELEASE FORM RELEASE OF ALL CLAIMS**

**Name of Activity: Bread of Life Youth Retreat  
Location: Our Lady of Sorrows, Bernalillo  
Telephone: 505-867-5252  
Date of Activity: March 26 – 28, 2010**

The undersigned do hereby release, forever discharge and agree to hold harmless Bread of Life Youth Retreat, Our Lady of Sorrows Parish, Franciscan Friars of the Renewal and the Archdiocese of Santa Fe from and against any and all liability, claims, demands, lawsuits and expenses of any kind arising from personal injury, sickness, death or property damage of any kind whatsoever which may be incurred or suffered by the undersigned and/or participant (if participant is 18 or under, 18 or older).

The undersigned further agree to indemnify and hold Bread of Life Youth Retreat, Our Lady of Sorrows Parish, Franciscan Friars of the Renewal, the Archdiocese of Santa Fe, and its respective members, directors, employees, and agents (collectively, the "Indemnities,") harmless from and against any and all claims, demands, actions, lawsuits, and liabilities, including attorney fees and expenses and costs sustained by the Indemnities as a result of negligent, willful or intentional acts of the undersigned and/or participant (if participant is 18 or under, 18 or older).

If participant is under 18 years of age, I (we) the parent (s) or legal guardian(s) of the participants, do hereby grant permission for our child to participate fully in the Bread of Life Youth Retreat and all of its activities and hereby give permission to Our Lady of Sorrows Parish, Franciscan Friars of the Renewal, and the Archdiocese of Santa Fe to take said participant to a doctor or hospital and hereby authorize medical treatment, including but not limited to emergency surgery and I (we) fully and completely assume all responsibility for all medical bills.

Further, should it be necessary for the participant to return home due to medical reasons, disciplinary action or otherwise, I (we) assume all responsibility and transportation costs.

**This form MUST be signed by ALL participants. If participant is under 18, parent or legal guardian must sign.**

NAME:			AGE	SEX: M ___ F ___
MAILING ADDRESS				
CITY	STATE	ZIP	E-Mail Address:	
TELEPHONE: (        )		CELL PHONE: (        )		
PARENT (S) OR LEGAL GUARDIAN (S) SIGNATURE				
				DATE
PARTICIPANT'S SIGNATURE (if 18 or older)				
				DATE
CHAPERONE'S NAME (who will attend Retreat with youth):				
PARISH / GROUP:				
NOTE: ANY PARTICIPANT <u>UNDER 18 YEARS OF AGE</u> MUST HAVE A WRITTEN PERMISSION SIGNED BY A PARENT OR LEGAL GUARDIAN TO LEAVE THE RETREAT DURING RETREAT HOURS				

# Archdiocese of Santa Fe – LIABILITY RELEASE

## PARENT / GUARDIAN

### PERMISSION SLIP / MEDICAL AUTHORIZATION / INDEMNITY AGREEMENT PHOTO-VIDEO RELEASE

**SPONSOR OF ACTIVITY**  
**ACTIVITY**  
**DATE(S) OF ACTIVITY**  
**PLACE OF ACTIVITY**

**Our Lady of Sorrows Parish**  
**Bread of Life Youth Retreat**  
**March 26-28, 2010**  
**Our Lady of Sorrows Parish**

The undersigned as parent or legal guardian of \_\_\_\_\_, does hereby give permission for the above named individual to attend the described activity.

As a condition of attending the described activity, I do hereby release the Roman Catholic Archdiocese of Santa Fe and all its affiliated parishes, schools and organizations, as well as their officers, agents and employees, from any and all claims, demands, actions, or causes of action due to death, injury, or illness, in any way, arising from the above described activity, including, but not limited to transportation to and from the event.

I further agree that the financial responsibility for securing care, in case of injury resulting from participation in the program, is a matter between the participant and his/her health care provider, and that the Archdiocese of Santa Fe cannot pay health care providers for treatment of any injuries. It is further agreed, that the participant will assume all legal responsibility for their personal safety and actions while participating in the program and while traveling to and from the program activities.

I hereby authorize the Supervisor of the activity or his/her designee to act in my behalf to authorize such medical attention, surgery, or other health care services, as may be recommended in an emergency situation while participating in the activity. If the below named physician cannot be reached, I hereby authorize any licensed physician or medical center to treat my child.

**I hereby authorize the Supervisor of the activity or his/her designee to administer the following medication to my child according to the instructions described here:**

**Medication:**

**Directions:**

**If the medication is prescribed by a doctor, the prescription in its original container will be provided to the Supervisor of the activity.**

**Name of Physician:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

→ **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
Parent/Guardian

**Parent / Guardian Telephone Home:** \_\_\_\_\_ **Work:** \_\_\_\_\_

**Emergency Contact Name:** \_\_\_\_\_ **Emergency Contact Number:** \_\_\_\_\_

**Allergies:** \_\_\_\_\_

## PHOTO-VIDEO RELEASE

I hereby give permission for my son/daughter \_\_\_\_\_ to be photographed or videotaped at the Bread of Life / Pan de Vida Retreat during the weekend of March 26-28, 2010.

I realize the photo/video may be published in the newspaper, a magazine, or other publications. The photo/video may be used for informational, educational, or promotional purposes regarding the three day retreat.

→ **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
Parent/Guardian