Deus Vocat (God is Calling) April 25 & 26, 2025 REGISTRATION CHECKLIST

Diocesan Permission Slip (Event name on Diocesan Permission Slip: "Deus Vocat Retreat 2025 &
Follow-up Gatherings for 2025-26 school year")

- □ Payment \$90 (late fee of \$95 after April 11 and depending on available space)
- **Recommendation Form for Participant (Pastor, Deacon, Youth Minister or Religious Director/Coordinator)**
- □ Photo Release Form
- □ Allergies: No □ Yes □ If yes, what allergy?_____
- □ Special diet needs (vegetarian, gluten free, lacto intolerant, other): No □ Yes □ If yes, please note_____
- □ Will your daughter bring doctor prescribed medication to the retreat? No □ Yes □ If yes, please note:
- COVID Test: At this time we are not requesting a COVID Test to be done, however, if your daughter has cold symptoms, it is better that she stay home to rest and recover. Thank you for your understanding.
- □ **PARENTS RETREAT SCHEDULE AND TRANSPORTATION:** Parents are requested to drop off and pick up your daughter each day or designate a person to drop off or pick up your daughter. Please provide the name and pone number of the person who has permission to pick her up.

SCHEDULE FOR FRIDAY, APRIL 25, 2025

Arrival Time: 4pm (at the Parish Hall) Pick-up Time: 9pm (at the Parish Hall)

SCHEDULE FOR SATURDAY, APRIL 26, 2025

Arrival Time: 8am (at the Church) Pick-up Time: 8pm (at the Parish Hall)

Transportation for your Daughter:

- □ I will drop off and pick-up my daughter each day.
- I have designated someone to pick her up: Name:

Telephone Number (cell number): ______

Please return this check-off list with the completed forms to the Office of Vocations by April 17, 2025 with a check made payable to the Office of Vocations, 2110 Broadway, Sacramento, CA 95818. If you make an online reservation and payment at <u>https://www.scd.org/deusvocat</u>, completed forms must also be submitted by April 17, 2023 (Registration cost will increase to \$95 after April 11, 2025 and *registrations will not be accepted after April 17th*).

Name of Participant				
Name of Parent:				
Home Tel.:	Cell:			
Email:				
Emergency contact if parents are not available:				
Home Tel.:		Name/Relationship		