



Office for Youth – The Diocese of Birmingham

# The CROSS Retreat

## March 8-10, 2019

More information at [www.crossretreat.net](http://www.crossretreat.net)



**Please Register Early! This retreat often sells out – Normal Registration Closes on Feb. 21st**

## Springville Camp and Conference Center, Odenville, AL

**When is the Retreat?** Check-In Friday is between 7:00 and 9:00 PM – **Do not arrive prior to 7:00 PM.** If you must later than 9:00 PM, get permission from the diocesan youth director (205-838-8301) before you sign-up for the retreat.

**4 Meals provided:** Saturday breakfast through Sunday breakfast. CROSS ends with the closing Mass on Sunday. The closing Mass begins at 11:15 AM. Family and friends are invited to join us for Sunday's closing Mass. Guests should not arrive before 11:00 AM. Visitors before 11:00 am should remain outside the building. Anyone who wants to visit the retreat at a different time needs advance permission.

**Cost:** \$70 per person. Make checks payable to the Office for Youth. We have a limited number of confidential scholarships available. Also, most parishes are willing to give financial assistance. Scholarship applications are available at [www.crossretreat.net](http://www.crossretreat.net).

➤ **Registration:** Space is limited. Do not wait to send your form, do it now to ensure your space.

➤ **All fees are non-refundable after February 21, 2019**

**Who May Attend?** Participants must be of high school age (grades 9-12). Please do not attempt to send younger people.

### The Purpose of the CROSS Retreat

1. To help teens increase their knowledge of Jesus Christ and the Catholic Church.
2. Using the general format of Called, Formed, Sent we work to foster growth toward being a Missionary Disciple
3. To offer an opportunity to meet new friends and have fun.
4. To give adult participants an experience of Catholic Youth Retreats.

The CROSS Retreat is planned and conducted **by** teenagers under the supervision of the Office for Youth of the Diocese of Birmingham.

➤ **Chaperones** Any parish sending four or more young people to CROSS should provide (and pay for) at least one qualified chaperone. Parish groups of more than nine should provide the number of qualified chaperones as called for in the diocesan Code of Conduct. All chaperones must have completed Youth Protection 1, have a current background check on file and be approved for service with youth by his or her pastor. Please contact us right away if you want to come but think there will be a problem finding chaperones.

### Directions to

#### Springville Camp & Conference Center

The Camp is located just off I-59 between Trussville and Gadsden.

- Take I-59 exit 148 (Argo)
- Follow signs to Hwy. 11
- Turn Left onto Hwy. 11
- Travel about 4.5 miles to Mountain View Rd.
- Turn Right onto Mountain View Rd.
- Travel about 4.25 miles to the Camp
- Camp entrance is on the Right
- Watch for camp signs

The retreat director's cell phone is (205) 335-2926. Be prepared to leave a message

A map and more complete directions can be found at [www.springvillecamp.com](http://www.springvillecamp.com)

#### Camp Address

3886 Mountain View Road

Odenville, AL 35120

**We suggest using directions instead of a GPS**

## What should a young person know before going to CROSS?

- 1) The retreat is in a rustic environment. We use bunk houses with heat, A.C. and modern bathrooms.
- 2) The food is good and servings are generous but don't expect gourmet.
- 3) You will be expected to fully participate in every part of the weekend. This includes getting up on time and being on time at activities.
- 4) There is a curfew, so don't expect to stay up all night.
- 5) Bring casual, outdoor type clothes but leave home anything that might be offensive at a church event. Open toe shoes should be avoided. Bring flip-flops for shower use only.
- 6) If you come to the retreat with an open mind, you'll make new friends and have a great time.



**Must participants be Catholic?** Young people of all faiths are welcome; however, CROSS is a Catholic retreat. All participants are expected to participate in all aspects of the weekend, including Mass.

**What about transportation?** Transportation is not provided. Carpooling with a teenager behind the wheel is strongly discouraged. All drivers under age 21 will be required to turn in car keys.

**Should a teen be forced to attend the retreat?** In most cases the answer is "no." Use your judgment in this regard, but you need to know that we will not put up with young people who refuse to fully participate or become disruptive.

When young people are uncooperative or disruptive we will call parents and they will need to come to the camp and take the child home. If you choose to force a teenager to attend the retreat please be prepared for the possibility of his or her removal.

### What to Bring

- Casual clothing suitable for outdoor wear
- Pillow
- Sleeping bag or blankets
- Personal toiletry items
- Appropriate shoes for active outdoor wear - No open toe shoes (except for shower wear)
- Towel
- Jacket
- Raincoat
- Flashlight
- Your favorite snack to share. All snacks are to be brought to the meeting room snack bar so they can be shared with the whole group.

Check payable and mail to:  
Office for Youth  
PO Box 12047  
Birmingham AL 35202  
(205) 838-8301

### Do Not Bring

- Clothing with inappropriate or rude graphics or words
- Radios, cell phones, CD players, TVs or electronic games, iPods, computers or similar devices
- Firearms, fireworks, knives or weapons of any kind
- Anything else that could distract you from the retreat atmosphere
- We cannot be responsible for valuables, so leave them at home

Please call or e-mail the Office for Youth if you have questions or concerns. Many times we can help clear up roadblocks to participation – especially when you ask in advance. You can reach us at (205) 838-8301 or [YouthMinistry@BhmDiocese.org](mailto:YouthMinistry@BhmDiocese.org).

# The CROSS Retreat

## Registration and Consent - Page 1

March 8-10, 2019

A Retreat for High School Age Youth (grades 9-12 only)

- Check-In on Friday between 7 and 9 PM
- Check-Out on Sunday at approximately 12:45 PM
- Retreat Fee: \$70 per person (Non-refundable after February 21st) – Scholarships may be available
- Location: Springville Camp and Conference Center, 3886 Mountain View Road, Odenville, AL 35120
- Transportation is not provided by the Diocese or the retreat
- Contact: The Office for Youth (205) 838-8301 or [YouthMinistry@bhmdiocese.org](mailto:YouthMinistry@bhmdiocese.org)
- See attached notes and [www.CROSSretreat.net](http://www.CROSSretreat.net) for details

-- ALL Participants must plan to stay for the entire weekend --

Please print all information – Complete both pages

First Name as Desired on Nametag: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Parish: \_\_\_\_\_ City Where Parish is Located: \_\_\_\_\_

Date of Birth: \_\_\_\_\_  Male  Female Grade: \_\_\_\_\_ (must be in grades 9-12)

Parent/Guardian's Name \_\_\_\_\_

E-mail address (optional) \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Parent Phone(s) with area code: \_\_\_\_\_

I grant permission for my child herein named to participate in the event described above.

I agree on behalf of myself, my child (named herein), our heirs, successors, and assigns to hold harmless and defend the Diocese of Birmingham in Alabama, its Bishop, Parishes, Employees and Volunteers from any liability for illness, injury or death arising from or in connection to my child's attendance at the event described above.

To the best of my knowledge, my child (named herein) is in good health, I assume all responsibility for the health of my child. In the event of an emergency, I give permission to transport my child for emergency treatment. I wish to be advised prior to any treatment by a hospital, clinic or doctor. ***I have noted all health/diet concerns on page 2 of this form.***

As parent/legal guardian, I remain legally responsible for any actions taken by my child (named herein). My child will conduct himself/herself in a proper and respectful manner. I understand that failure to abide by standard codes of conduct will cause my child to be dismissed from the above named event. I agree that if my child is dismissed from the event I will travel (or send an adult designee) at my expense to the event location and retrieve my child.

Yes  No **Media Permission** I give my permission for my child (named herein) to be photographed and/or recorded at the event described herein and understand that media produced may be used to advertise or promote future events:

**Print Parent Name** \_\_\_\_\_

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

**Complete both pages of this form**

Participant Name: \_\_\_\_\_

MEDICAL INFORMATION

Family Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Family Health Plan Carrier: \_\_\_\_\_

Policy/Contract Number: \_\_\_\_\_ Phone: \_\_\_\_\_

Name of Policy Holder: \_\_\_\_\_

My child is taking medication at present. He or She will bring all medications necessary, and such medications will be well labeled. Names of medications and instructions: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Optional Instruction** (Check if "yes")  
Do not give non-prescription medication of any kind to my child without my express permission.  
Exceptions: \_\_\_\_\_

Allergic Reactions (medications, foods, plants, insects, etc.) \_\_\_\_\_

Date of Last tetanus shot: \_\_\_\_\_

Special Dietary Concerns: \_\_\_\_\_

-- Note: The parent or guardian must provide any special foods required by the child.

Physical Limitations: \_\_\_\_\_

Special medical or psychological conditions of my child:

\_\_\_\_\_  
\_\_\_\_\_

-- Any other information you wish to give us--

\_\_\_\_\_  
\_\_\_\_\_

Alternate Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

**Complete both pages of this form. Make Check Payable and Mail to:**

**The Office for Youth  
PO Box 12047  
Birmingham, AL 35202-2047**

**\*\* Scholarships should be requested early \*\***