

# CARDINAL NEWMAN AND URSULINE

## Senior Retreat 2009

It is time to sign up for your Senior overnight spring retreat. Two different retreat dates are available to Seniors. Please prioritize your options by marking **1** next to your **first** choice and a **2** next to your **second** choice.

\_\_\_\_\_ Sunday, Feb 22<sup>nd</sup> to Tuesday, Feb 24<sup>th</sup>  
Westminster Woods, Occidental

**OR**

\_\_\_\_\_ Sunday, March 22<sup>nd</sup> to Tuesday, March 24<sup>th</sup>  
Westminster Woods, Occidental

---

Students are to arrive at the CN/UHS covered eating area on the Sunday of the retreat at 3:15 PM. Students will return to campus by 2:25 PM on Tuesday.

---

The cost of the retreat is \$160.00. The cost includes, room, board and transportation. **It is not necessary to send in money.** The finance office will bill your account after signing up for the retreat. There is a \$40.00 non-refundable deposit once a student is signed up.

**INSTRUCTIONS:** Prioritize your date options and print your name at the bottom (neatly). Return this sheet to Mrs. Meyer room 1, to Mr. Contreras in room 18 at Cardinal Newman, or your Religion Teacher.

All students must complete the Conduct Agreement on the back of this form and get it signed by your guardian.

CN students: You **MUST** complete and return the **permission slip**

UHS students: We have a permission slip on file for you

**STUDENT'S NAME:** \_\_\_\_\_

Please Print

UHS students/parents may contact Mrs. Meyer at 524-1130 ext. 158 or [ameyer@ursulinehs.org](mailto:ameyer@ursulinehs.org)

CNHS students/parents may contact John Contreras 546-6470 ext. 305 [contreras@cardinalnewman.org](mailto:contreras@cardinalnewman.org)

<p><b>Due before December 10<sup>th</sup>/11<sup>th</sup></b> <b>In Your Religion Class</b></p>
---

# Cardinal Newman and Ursuline High Schools Retreat Conduct Agreement 2009

As a student attending this retreat we expect that you will:

- Be on time to and participate fully in all retreat activities.
- Show respect toward retreat staff, leadership, and the facility's property.
- Not engage in the use of alcohol, drugs, tobacco products, or sexual/intimate behavior.
- Respect each others' space. (This means that you may not be in each others' cabin or each others' personal belongings at any time.)
- Honor lights out (No running around or socializing after bedtime.)

**I understand and agree to the above rules and expectations of this of agreement. I understand that breaking the rules/expectations will result in disciplinary action and may result in being sent home from the retreat.**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Parent Signature

**NOTE TO PARENTS:** Please see that your daughter or son and the retreat staff know how to contact you in case of an emergency or breech of conduct agreement.

---

## Cardinal Newman Retreat Permission Slip

50 Ursuline Road  
Santa Rosa, CA 95403

To Whom it May Concern:

I give my son, \_\_\_\_\_, permission to attend the **retreat checked on the reverse side of this form.**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
(Parent /Guardian)

In case of emergency, illness, or accident, the school is authorized to obtain medical treatment for my son.

Parents: \_\_\_\_\_  
(Address) (Phone)

Take Student to Hospital: \_\_\_\_\_  
(Address) (Phone)

Health Insurance Carrier: NAME: \_\_\_\_\_

POLICY NO. or PLAN \_\_\_\_\_

Any Allergies? \_\_\_\_\_

Medication currently being taken? \_\_\_\_\_

Medical conditions that staff should be aware of: \_\_\_\_\_

**Do not send in money. The finance office will bill your account.**