

**MONTINI CATHOLIC**  
**CAMPUS MINISTRY CENTER**

**Junior Retreat**  
**LaSalle Manor, Plano**

Reminders:

- When you come to school put your bags in the hallway to the chapel. The bags will be checked during first period by the deans.
- Attend 1<sup>st</sup> period class (it is okay to attend 1<sup>st</sup> period “dressed down” ready for retreat).
- Immediately after first period come to the chapel for attendance. It is imperative that you come immediately after the bell so that attendance can be taken and we can load the bus.
- We will leave Montini by bus at 9am the first day of retreat.
- We will leave Plano at 3pm (second day of retreat) and should arrive back here by 4pm (depending on traffic).
- Please be respectful on the bus...watch your language, remain in your seat and don't leave any garbage on the bus.
- Listen to all instructions of the staff at LaSalle Manor. We are guests so please be respectful. Remember that you represent Montini.
- You should respect and be polite with the entire staff at the Manor, including cooks, the ladies who clean our rooms, maintenance man etc.
- Do not bring homework.
- Do not bring cigarettes, alcohol or other drugs.
- If you are taking any medication you need to inform the chaperones and give it to them to hold for you while we are at LaSalle Manor.
- You should bring casual clothing.
- Can bring money for the gift shop.
- If you bring snacks you may not keep them in your room. You will need to share them with the entire group.
- Bring sandals/slippers (outside shoes are not allowed inside).
- Pillows, linens, towels, and blankets are provided so you do not need to bring them.
- **BOYS ARE NEVER TO GO ON THE GIRLS FLOOR AND THE GIRLS ARE NEVER ALLOWED ON THE BOYS FLOOR!!!!!!**

- YOU ARE NOT TO GO IN EACH OTHERS ROOM.
- PACK LIGHT!
- You may bring a journal, musical instrument, bible.
- Please eat breakfast. Lunch is served at noon.

Be Respectful....Participate....Be open to the Spirit .....AND ENJOY!

**LET'S HAVE FUN AND MAKE THIS A GOOD RETREAT!**

# LaSalle Manor Student Information Sheet

(8/8/16)

## **BRING**

Clothing that covers shoulders and is appropriate to season

Toiletries

Slippers or flip-flops for indoors (shoes not allowed in cabin)

Closed toe shoes required for outdoor activities

***Pillows, linens, towels, and blankets are provided so you do not need to bring them.***

Students using or possessing Tobacco or Nicotine products will be fined \$100 per offense. This includes but is not limited to regular or electronic cigarettes, cigars, chewing tobacco etc. Students using or possessing Alcohol or other Illicit Drugs will be sent home. All infractions may be subject to discipline procedures outlined in your school handbook.

## **Optional**

### **Snacks to Share**

Change for Pop Machine

Musical Instrument

Money for the Gift Shop

Swimsuit (Seasonal)

Fishing Gear (Seasonal)

Ice Skates (Seasonal)

***Our first meal is lunch, served approximately at noon. Please plan accordingly.***

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Please complete this section and return it to your school's Campus Minister before the day of the retreat. Thank You!

I understand the above information, and I agree to follow all the rules of the Retreat Center. If I break the rules, I understand that I may be sent home at my parents' cost and time. ***Disrespect for persons or property will not be tolerated and any damaged property will be at my expense.***

**Student Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

I understand my son/daughter will be attending a retreat at LaSalle Manor on (date) \_\_\_\_\_. I further understand that if my son/daughter disrupts the purposes of the retreat, he/she may be sent home at my expense and time.

**Parent Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Throughout the year students may be highlighted in efforts to promote La Salle Manor Retreat Center. We are seeking your approval (sign below) to have you and/or your child photographed and/or videotaped for educational purposes, yearbook opportunities, and for website/facebook photo sharing of their retreat experiences.

**Student Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Parent Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

*Medical Information/Release Form*

School \_\_\_\_\_ Date of Birth \_\_\_\_\_

\_\_\_\_\_  
Last Name First Name Middle Initial

\_\_\_\_\_  
Street City State Zip Home Telephone

\_\_\_\_\_  
Name & Telephone Number of Person to Contact in Case of Emergency

\_\_\_\_\_  
Name, Address, Office & After Hour Telephone Numbers for Family Physician

\_\_\_\_\_  
Name of Personal Health & Accident Insurance Company

\_\_\_\_\_  
Allergies, Reactions, or Other Comments

As a parent/guardian, I do hereby authorize the treatment by a qualified and licensed Medical Doctor in an emergency which, in the opinion of the attending physician, may endanger my child's life, cause disfigurements, physical impairment, or undue discomfort if delayed. This authority is granted only after a reasonable effort has been made to reach me. This medical treatment release form is completed and signed of my own free will with the purpose of authorizing medical treatment under emergency circumstances to my child in my absence.

\_\_\_\_\_  
Parent or Guardian Signature & Date

As a parent/guardian, I do hereby agree to waive and release all claims I may have against LaSalle Manor and their officers, agents, employees, and volunteers as a result of my child's activities. The exception would be any injury or damages that may occur because of the sole negligence, gross negligence, or willful or wanton misconduct of LaSalle Manor, its officers, agents, employees, or volunteers.

\_\_\_\_\_  
Parent or Guardian Signature & Date