

**ANTIOCH 2018**  
**10<sup>th</sup> GRADE CONFIRMATION CANDIDATES**

You are invited to:

**Antioch 2018**

*An extraordinary weekend retreat experience at  
St. Rose of Lima, East Hanover, NJ*

**Saturday, January 13<sup>th</sup>**

9:00am – 9:00pm

**&**

**Sunday, January 14<sup>th</sup>**

9:00am – through the conclusion of 4pm mass

*Please make check payable to “St. Rose of Lima”*

*COST: \$65.00 per candidate*

**Return payment, registration form, medical form (back & front), as soon as possible  
but no later than November 1, 2017. Please be sure that everything is signed.**

**RETURN FORMS AND PAYMENT TO:**

Lisa Paradiso

c/o St. Rose Church of Lima Church

312 Ridgedale Ave.

East Hanover, NJ 07936

**Questions:** Contact Lisa Paradiso at [lparadiso@saintroseoflimachurch.org](mailto:lparadiso@saintroseoflimachurch.org) or Stephanie Politi at [spoliti@saintroseoflimachurch.org](mailto:spoliti@saintroseoflimachurch.org).

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- *Parents & Family* are strongly encouraged to attend a special closing Mass at 4pm on Sunday, January 14<sup>th</sup>. This mass satisfies the Sunday obligation.
  - Upon registration you will be assigned a food and/or drink donation for the retreat.
  - Further information & details on the retreat will be distributed at future Confirmation class sessions, mailings and emails.

**ANTIOCH – 10<sup>TH</sup> GRADE  
CONFIRMATION CANDIDATES**

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STUDENT NAME: \_\_\_\_\_ Age: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_ **Parent E-Mail:** \_\_\_\_\_  
(Where a parent may be reached during retreat)  
Parent cell # 1. \_\_\_\_\_ #2. \_\_\_\_\_ Student cell# \_\_\_\_\_  
High School: \_\_\_\_\_ Grade: \_\_\_\_\_ Parish \_\_\_\_\_

**\*IMPORTANT** - attending an Antioch Retreat is a **mandatory** component of the Confirmation Preparation Program. If you cannot attend our retreat, you must attend one in another parish prior to our April 26, 2018 Confirmation date. We can provide some information on alternate locations.

\_\_\_\_\_ I will attend St. Rose retreat  
\_\_\_\_\_ I will attend another retreat

In consideration of full payment & accepting my teen's registration for this retreat, I release, hold & discharge Saint Rose of Lima, their officers, trustees, employees, volunteers, chaperones, & affiliates of and from any and all liability, claim, loss, damage, cost or expense & wave any such claims against any such person or organization in connection with this retreat. I agree to indemnify & hold harmless the Paterson Diocese & its affiliated personal from any such liability, claim, loss, damage, cost or expense.

\_\_\_\_\_  
Parental Signature Date

\*All parents are requested to make a food or drink donation which will be assigned to you at a later date. Additionally we need some parents to volunteer their time. See below.

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Parent / Guardian Name: \_\_\_\_\_

**VOLUNTEER - MUST HAVE PROTECT GOD'S CHILDREN CLEARANCE**

Serve breakfast \_\_\_\_\_ Saturday \_\_\_\_\_ Sunday

Serve lunch \_\_\_\_\_ Saturday \_\_\_\_\_ Sunday

Serve dinner \_\_\_\_\_ Saturday

Serve as hall monitor \_\_\_\_\_ Saturday \_\_\_\_\_ Sunday

\*Serve as recreation monitor\* \_\_\_\_\_ Saturday

\* Volunteers will serve as supervisors for open gym period, including basketball and other activities – approximately 90 minutes.

\*Some Dads would be a big help.