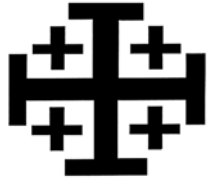




Diocese of Raleigh

715 Nazareth Street, Raleigh, NC 27606



2011-2012

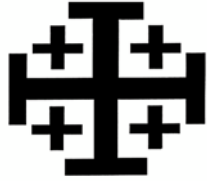
Search for Christian Maturity

Greetings in Christ! Attached you will find information (in English and Spanish) and a registration form for the **Search for Christian Maturity Retreat Program**. Search is an intensive retreat program for 11th and 12th graders. The dates and details are on the information pages.

Encourage your young people to invite their friends (Catholic and non-Catholic) to attend this event with them as a guest of your parish.

If you have any questions about the program or any other Youth Ministry issues, don't hesitate to contact the Office for Youth Ministry (919/821-9770).

May God continue to bless your ministry and your life abundantly!



Search for Christian Maturity

The Search Program is an instrument through which the Holy Spirit speaks to and directs young people through the works, actions, and lives of their peers. It provides an opportunity for each young person to gain greater insight into the meaning of Christianity in their life and thoughts of those their own age who have begun already to find and discover insights and meanings". – National Federation for Catholic Youth Ministry

What is it?

Search is a retreat weekend sponsored by the Diocese of Raleigh that touches people's lives because it encourages participants to seek and find Christ in them and in one another. It is a series of witness talks and activities prepared and given by a team of high school youth. The weekend gives you the opportunity to look at your faith and life in a new way.

Who is it for? Who goes to Search?

11th & 12th graders, and adults who work with them, who want to be a part of an exciting and different weekend attend a Search Retreat. People participate in the Search program for various reasons. Some go to experience something different, others to meet and spend time with people their own age. Some have a strong faith while others are questioning God's existence. Don't let nervousness stand in the way of a special weekend. Please join us for an experience that will be long remembered.

Where and when will it be held?

All Search Retreats are held at Short Journey Center in Smithfield, NC.

The weekend begins promptly at 7:30 Friday night (participants are asked to arrive no later than 7:00 pm to settle in). The weekend concludes Sunday at approximately 2:00 pm.

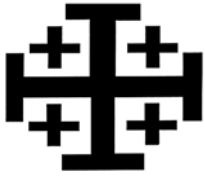
The Retreat schedule for 2010-2011 is as follows

<u>Search #</u>	<u>Date</u>	<u>Registration deadline</u>
Search 164	November 11-13, 2011	November 2, 2011
Search 165	December 9-11, 2011	November 30, 2011
Search 166	February 10-12, 2012	February 1, 2012
Search 167	March 9-11, 2012	February 29, 2012

How much does it cost?

Cost for the Search Weekend is **\$105 for youth/\$105 for adults**. No one is denied participation in our programs because of inability to pay. For more information, contact the Registrar register@raldioc.org, (919) 821-9744 for a scholarship form.

To participate, simply complete and return the registration form (attached) with your **\$15 non-refundable deposit** by the deadline above to: Registrar – Search Program, Diocese of Raleigh, 715 Nazareth St. Raleigh, NC 27606



Búsqueda de una Madurez Cristiana

"El programa Search habla a, y dirige a los jóvenes sobre las obras, acciones, y vidas de sus compañeros. Da oportunidad a cada joven para ganar mejor conocimiento a lo que significa el ser cristiano y a los pensamientos de sus compañeros quienes ya han comenzado a encontrar y descubrir conocimientos y entendimiento." -- National Federation of Catholic Youth Ministry

¿Que es este programa?

Search es un retiro en fin de semana patrocinado por la Diócesis de Raleigh que conmueve sus vidas por el animo que da a los participantes para buscar y encontrar a Cristo en si mismos igual que en otros. Es una serie de presentaciones y actividades preparadas y enseñadas por un equipo de jóvenes estudiantes de preparatoria. Los temas cubiertos dan la oportunidad de ver su fe, sus dudas, sus aspiraciones y ensueños, no nomás suyos, si también de sus compañeros y los de su iglesia.

?Para Quien Es? ?Quien Va a Search?

Los jóvenes del 11 y 12 grados quienes desean tomar parte en un fin de semana diferente y excitante. Jóvenes participan en el programa Search por diferentes razones. Algunos van porque quieren experimentar algo diferente, otros para pasar el tiempo con otros jóvenes de su edad. Unos tienen ya mucha fe, otros todavía tienen duda de la existencia de Dios. No deje que nada le impida el participar en un fin de semana especial. Venga a pasar una experiencia que jamás olvidara.

?Donde y Cuando Es?

Todos los retiros Search son asistidos en el Short Journey Center en Smithfield, NC. El retiro comienza el viernes a las 7:30 PM (se pide que los participantes lleguen a las 7:00 PM para acomodarse en su alojamiento.) Se concluye el domingo a las 2:00 PM aproximadamente.

El plan para el retiro Search para los años 2011-2012 es como se sigue:

<u>No. de Search</u>	<u>Fecha</u>	<u>Termino de Registro</u>
Search 164	11 al 13 de noviembre 2011	2 de noviembre 2011
Search 165	9 al 11 de diciembre 2011	30 de noviembre 2011
Search 166	10 al 12 de febrero 2012	1 de febrero 2012
Search 167	9 al 11 de marzo 2012	29 de febrero 2012

¿Cuánto Cuesta?

El costo por todo el fin de semana de Search es **\$105 por cada joven y \$105 por adulto** si se registra a tiempo en el día de registro indicado. A nadie se le niega participar en nuestros programas por falta de recursos económicos. Para mas información, comunicar con la Registrar al 919-821-9744 o e-mail register@raldioc.org por scholarship form.

Para participar simplemente complete y retorne la forma de registro con su **deposito de \$15**, cual no se le devolverá, para la fecha ya dicha a: Registrar – Search Program, Diocese of Raleigh, 715 Nazareth St., Raleigh, NC 27606.



FORM B: Event Specific Medical Release | 2011

Event: Search for Christian Maturity

Location: Short Journey Center Smithfield, NC

Time: 7pm Friday – 2 pm Sunday

Dates (please circle the Search you are registering for):

Nov. 11-13, 2011 Dec. 9-11, 2011 Feb. 10-12, 2012 Mar. 9-11, 2012

Grade (please circle): 11th 12th

Dear Parent/Guardian,

Your son/daughter is eligible to participate in a diocesan activity that requires transportation to a location away from the parish site. If you give permission for your child to participate, please complete BOTH SIDES of the form below. This activity will take place under the guidance of adults from the Diocese of Raleigh.

Participant's Full Name _____ **Gender: M/F** _____

Address _____ **Zip** _____

Parent(s)' Name(s) _____

Parent(s)' Email(s) _____

Home Number _____ **Daytime number of Parent** _____

Emergency Contact of person other than parent:

Name _____ **Phone** _____

Relation to Participant _____

Please list any allergies or medical, physical, or dietary restrictions/requirements:

****If your child is presently taking any Prescription Medications, please fill out and attach Form C.****

Medical Insurance Company _____

Policy ID Number _____



FORM B: Event Specific Medical Release | 2011

If your child may participate in this event, please complete, sign and return the following statement of consent and release of liability. As parent/guardian, you remain fully responsible for any liability, which may result from personal actions taken by your son/daughter. **If your child is in possession of drugs, alcohol, or tobacco products, engages in illegal, immoral, or offensive behaviors, or refuses to follow the directions given by the staff or volunteers while participating in this event, you will be contacted to pick up your child immediately.**

Please Initial:

_____ I hereby consent to the participation of my child, _____, in the event described above. I further consent to the conditions stated above regarding participation in this event, including the method of transportation.

_____ I release the Diocese of Raleigh, _____ (parish name), _____ (parish city), and their agents and volunteers from any injuries, which may be incurred by my youth.

_____ I give permission for my child, in case of emergency, to be taken to a physician or hospital by either an adult youth leader, diocesan or parish personnel. I understand that every effort will be made to contact me. *If I cannot be reached*, however, I hereby give permission to the physician selected by the adult in charge, to hospitalize and secure proper treatment, including surgery, for my son/daughter.

_____ I hereby grant permission to any diocesan or event staff person to provide the following over-the-counter drugs to my son/daughter if necessary. *PLEASE CHECK ALL THAT APPLY (NOTE: CATEGORY OF MEDICINE AND AN EXAMPLE ARE LISTED, ALTHOUGH A DIFFERENT BRAND MAY BE USED.) DOSES ARE NOT TO EXCEED MANUFACTURER’S RECOMMENDED DOSAGES.

- ___ Ibuprofen (Advil/Motrin)
- ___ Acetaminophen (Tylenol)
- ___ Naproxen (Aleve)
- ___ Antibiotic Ointment (Neosporin)
- ___ Antihistamine/Decongestant (Actifed/Sudafed/Benadryl)
- ___ Antacids (Rolaids/Tums)
- ___ Allergy Relief (Claritin / Zyrtec)
- ___ Antitussives/Cough Relief (Robitussin)
- ___ Other (Please Specify): _____

Electronic/mobile communication affords the Diocese of Raleigh staff or event coordinators the best means of providing reminders and updates to participants. Please provide an email address and/or cell phone number for such communication purposes.

Participant E-mail address _____ **Participant Cell Phone #** _____

Signature of Parent/Guardian: _____

Relationship to Participant: _____ **Date:** _____



FORM C: Prescription Medication Inventory | 2011

My child (please print full name) _____ is on Prescription Medication that will need to be administered during this Diocesan Youth event: _____. By completing and signing this form, I certify that the information is an accurate representation of my child's doctor's prescriptions.

When completing the chart, please be as specific as possible for cleared adults to help your child remember the schedule.

Medication Name	Purpose of Drug	Amount Taken	Time of Day	# Times Taken per day	Other Instructions (ex. Take with food)
			(AM/PM)		
			(AM/PM)		
			(AM/PM)		
			(AM/PM)		

By my signing this, I release Diocese of Raleigh Staff, The Office for Youth Ministry, additional chaperones, and the Diocese of Raleigh from any and all liabilities and waive all claims against them. I also give my permission for the event coordinator and other qualified adults to obtain proper medical treatment for my child should it become necessary.

Signature of Parent _____ Date _____

Relationship to Participant _____

*Please attach this form to Form B