



Peace XVII



Our Lady of Fatima, Bridgeport

Weekend of June 2-4 2023

Camp Hazen YMCA

Dear Candidates,

The Peace Weekend Retreat is a program intended for young adults to guide and strengthen their faith and spirituality through their families, church, and local community. The weekend is a 72-hour experience filled with spiritual discussion, uplifting music and worship, and a chance to meet new friends and build bonds within the Catholic community. The retreat is led by Spiritual Directors made up of Priests and Deacons from surrounding parishes and a team of Emmaus/Peace members comprised of past candidates who want to share their experience with you.

The weekend begins Friday evening June 2, 2023 and ends Sunday evening with a closing ceremony on June 4, 2023. The cost of the weekend is \$125 per candidate which will cover lodging, meals, transportation back to Our Lady of Fatima in Bridgeport on Sunday evening and an unforgettable experience. Any adult from the ages of 19-40 are encouraged to enroll and are accepted on a first come first serve basis. We hope you choose to take the journey on the Walk to Emmaus and we look forward to meeting you.

Peace 17 Rectora,

Jen Dinis

Spiritual Director: *Father Rogerio Perri*

Date Received: _____

Our Lady of Fatima Bridgeport Peace 17

APPLICATION

Name: _____

Nickname: _____

Address: _____

Phone: _____ Email: _____

Date of Birth: _____ Age: _____

School/Occupation: _____

Mother's Name: _____ Contact Number: _____

Father's Name: _____ Contact Number: _____

Spouse's Name: _____ Contact Number: _____

Emergency Contact Name & Number: _____

Do you have any allergies we should be aware of? _____

Do you have any dietary restrictions we need to be aware of? _____

Why do you want to participate in a Peace weekend? _____

Anything else you wish to tell us? _____

T-Shirt Size: _____

Candidate Signature: _____ Date: _____

Parent Signature: _____ Date: _____

Our Lady of Fatima Bridgeport Peace 17

HEALTH HISTORY

THE HEALTH HISTORY is for you/the parent/ or the guardian to complete. It provides information on you which we need to know in the event of an emergency. This form will accompany us on this and any other activity that the our Lady of Fatima Bridgeport Peace/Emmaus may have. All the information given on this form will be kept in the strictest of confidence of the Peace team. I understand that the parish and the adults are not responsible for any accidents that might happen on this trip.

Activity: _____ Date: _____

Name: _____ Date of Birth: _____

Address: _____

Phone #: _____ Emergency Phone #: _____

Relationship: _____

Allergies:

___ Bee Sting ___ Antibiotic ___ Insect Bite ___ Drugs (Specify) ___ Food (specify). ___ Aspirin ___ Hay Fever
___ Poison Ivy, Oak

Other conditions or details of above: _____

Suggestions on how to handle above problems: _____

Chronic/Recurring conditions:

___ Ear Infections ___ Heart Disease ___ Convulsions ___ Nosebleeds ___ Diabetes ___ Behavior ___ Asthma
___ Other

Suggestions on how to handle the above problems: _____

Have you had a Tetanus Shot? _____ When? _____

Recommendations and Restrictions:

Special Diet: _____

Medication (specify): _____

Aspirin Permitted? _____ Dosage: _____

Activities to be restricted: _____

Any other medical or emotional condition we should know about? _____

This parent/guardian authorization is given to Peace 17 RECTORS

Parent/Guardian Authorization: This health history is correct as far as I know, and the person herein described has permission to engage in all prescribed activities, except noted by me and/or the examining physician. In the event of a medical emergency, I understand every effort will be made to contact the parent/guardian. In the event I cannot be reached in an EMERGENCY, I thereby give permission to the physician selected by the RECTORAS to hospitalize secure proper treatment for, and order injection, anesthetic or surgery as deemed necessary for my child/ward as named above.

Date: _____ Signed: _____