

Participant Information *(Please Print)*

Name _____ Male / Female _____ Month/Year of Birth ____ / ____
First Last Please Circle
Address _____
Street City ST ZIP
Phone _____ E-Mail _____
Parish/Church _____ School _____ Grade ____
Name City

Parent/Guardian Information *(Please Print)*

Name _____
First Last
Address (if different from above) _____
Street City ST ZIP
Phone _____ E-Mail _____

Registration Information *(Please Print)*

Search you wish to attend _____ Date _____ Location _____ Shirt Size M L XL XXL
Please Circle
Registration Fee \$55 (Cost Includes Registration, Materials, Bible, Food & T-Shirt) Amount Included \$ _____ Amount Due \$ _____
Please write the name of the person who influenced you to make Search _____

Search for Maturity - Parent/Guardian Release and Consent & Medical Information *(Please Print)*

I, (parent/guardian) _____, the undersigned, give permission for my child/ward _____ to attend the Search to be held at the _____ Center on (date) _____, and agree to release, exonerate, indemnify and defend the Roman Catholic Bishop of Providence, the Catholic Youth Organization of the Diocese of Providence, my parish _____ and the CYO of Northern Rhode Island, Inc. from all claims arising from, or occasioned by my child's/ward's attendance at this event.

I also grant permission if needed for my child/ward to be evaluated, diagnosed, treated and/or medicated in accordance with standard medical practice by licensed medical personnel. I relieve the Roman Catholic Bishop of Providence, the Catholic Youth Organization of the Diocese of Providence and the CYO of Northern Rhode Island, Inc. of all responsibility and consequences that may arise as a result of this treatment. I will not hold any of the parties listed above or representatives associated with the program responsible in the event of injury. Further I agree to accept any financial responsibility as a result of scheduling such treatment.

I GRANT PERMISSION for the adult chaperones for this event to administer non-prescription drugs as needed for my child/ward (aspirin, ibuprofen, antacids, etc.) ___ Yes ___ No

I AUTHORIZE the Catholic Youth Organization of the Diocese of Providence to use photographs/videos of my child/ward for productions, publications, etc. ___ Yes ___ No

Parent Name _____ Parent Signature _____ Date _____

My child is allergic to: _____ My child must take the following medication(s): _____
Dosage: _____ Frequency _____

You should be aware of the following health/medical conditions of my child: _____

Parent/Guardian name: _____ Phone # _____

Other ways to reach (i.e. cell phone, work phone - please specify): _____

If parent/guardian cannot be reached in the event of an Emergency, please notify: _____

Phone # _____ Alt Phone # _____ Relationship to Youth _____

Persons 18 years of age or older - please sign release yourself!

www.ymcyopro.org
401-278-4626
Providence, RI 02903
One Cathedral Square

Diocese of Providence
Office for Comprehensive
Youth Ministry



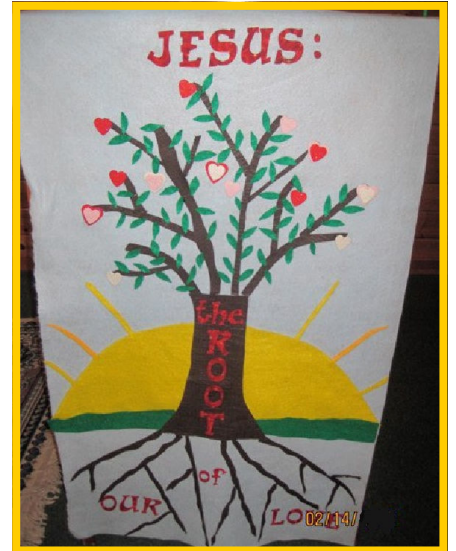
YOUTH SEARCH

GOT SEARCH?

A Search is a weekend experience for youth who are at least sophomores in high school through early college age. The weekend is lead by peer leaders and consists of fun dynamics, shared ideas, prayer, and lots of laughs!



"Search is the one weekend where you make new friends, grow closer to God, and have the experience of a lifetime." ~ Sarah C.



"Search is where you can escape the world and just spend time with God." ~ Brian C.



"It's something that lives in your heart forever." ~ Kelsey M.

Search is a unique weekend retreat experience...

- ✝ where you take a deeper look at **who you are** and your relationships with family, friends and God.
- ✝ where you look at what hinders and what benefits those relationships.
- ✝ where you can learn different tools to help you deal with life's problems.
- ✝ where you're not alone, but part of a larger community.

WHEN & WHERE

Sept. 10-12, 2010 (Spanish)
Nov. 19-21, 2010
Apr. 8-10, 2011

Emmaus Youth Center (EYC)
25 Metropolitan Park Drive
Riverside, RI 02915
401-433-4327

Please return Registration Form and make checks payable to the Center hosting the Search you wish to attend.

Father Marot CYO Center (FMC)
53 Federal Street, PO Box 518
Woonsocket, RI 02895
401-762-3252

July 9-11, 2010
Oct. 15-17, 2010
Dec. 10-12, 2010
Feb. 18-20, 2011
Apr. 8-10, 2011
July 8-10, 2011

June 25-27, 2010 (Spanish)
July 23-25, 2010
Feb. 18-20, 2011
Feb. 25-27, 2011 (Spanish)
June 24-26, 2011 (Spanish)
July 8-10, 2011

Rejoice in Hope Youth Center (RIH)
804 Dyer Avenue
Cranston, RI 02920
401-942-6571