

Young Men's Summer Camp



(858) 768-0872 • infowest@mileschristi.org • www.mileschristi.org

Full Name:		
Address:		
City/State/Zip:		
Phone:	T-Shirt Size	Age:
Email:		Carpool: YN

Registration Form

Please make check payable to Miles Christi and return form and payment (\$360) by July 22 to:

> Miles Christi P.O. Box 910331 San Diego, CA 92191



P.O. Box 910331 San Diego, CA 92191

May 2022

Dear Parents,

Miles Christi would like to invite your son to attend a *Young Men's Summer Camp*. This is a camp designed for young men ages 14-18 and is a great opportunity for your son to focus on his spiritual life along with his peers. The *Young Men's Summer Camp* will include: Holy Mass, spiritual talks, and opportunity for Confession, as well as sports, recreation, and time for socializing.

The camp begins on Monday, August 1, 2022 at 4:00 pm, and finishes on Friday, August 5, 2022 at 11:00 am. It is being held at the Camp High Sierra, 869 Lake Mary Rd, Mammoth Lakes, CA 93546. Driving directions are enclosed with this letter. The cost is \$360, which includes room and board.

In order to facilitate transportation to Camp High Sierra, we will travel with vans departing on Monday, August 1, at 8:00 am, from our Miles Christi house located at 16631 Valle Verde Rd., Poway, CA, 92064 and at 8:30 am from the park & ride lot located at intersection of I-15 and Hwy-76 (next to the Mobil gas station). We will be back at the park & ride lot and at the Miles Christi house on Friday, August 5, at 6:00 pm and 6:30 pm, respectively. You may drive your son to the Camp High Sierra, dropping him off on Monday, August 1, at 4:00 pm and picking him up on Friday, August 5, at 11:00 am. We ask you to please let Elena know about your preference in regards to transportation.

Please fill out the registration form (print or type) and mail it with the enclosed waivers and payment as soon as possible. Note that there are limited spaces for this camp. Therefore, if you cannot mail in the registration form, waiver and payment by July 22, please email Elena Di Ventra at ediventra@mileschristi.org to confirm your registration. If, regrettably, you have to cancel at the last minute, please let Elena know immediately.

Your son will need to bring a Bible or New Testament, clothing appropriate for the recreational activities at the camp, and all his personal items (toiletries, medicines, etc.). We request that the young men bring their own towel, sleeping bag, and pillow. Call Elena if your son has any physical disability or special dietary needs before registering.

If you have any questions, please contact Elena Di Ventra at ediventra@mileschristi.org. We hope that you will encourage your son to consider attending this event and to take advantage of this opportunity to grow in his faith!

May Our Lord and His most Blessed Mother bless you and keep you in their Hearts,

The Priests of Miles Christi

Waiver of Liability and Agreement to Indemnify

Miles Christi is very happy your son will be attending this Young Men's Summer Camp! The intention of this retreat is to help the young men increase in their spiritual life and enjoy some recreation. Miles Christi has organized this retreat with the assurance that it will be a grace filled time. However, since many young men will participate in this retreat our insurance company requires that we ask you as a parent or legal guardian to sign this waiver form. Please know that the integrity, spiritual and physical health of all the young men attending is our first concern. We hope nothing happens, but in the unforeseen event that a difficulty occurs during the retreat, this form will be helpful to better attend to the matter quickly and promptly. Thank you!

<u>PERSONAL CONDUCT</u>: I understand *Miles Christi* has the authority to establish and apply rules of conduct necessary for the activities during the *Young Men's Summer Camp*. If a participant has disruptive behavior or breaks the established rules, the director of the program will have authority to inform the parent and correct the participant in an appropriate way, including removal if necessary.

INSURANCE COVERAGE: I understand that my son is required to have adequate health, accident, and hospitalization insurance in order to be covered during participation in the *Young Men's Summer Camp*, and I hereby affirm the same. I recognize and expect that no part of the program fee goes toward payment of such insurance (unless otherwise stated) and that *Miles Christi* has no obligation to provide such insurance.

MEDICAL TREATMENT: (PLEASE DESCRIBE ANY HEALTH, PHYSICAL, AND/OR PSYCHOLOGICAL PROBLEMS ON THE REVERSE OF THIS SHEET.) In the event of illness or injury to my son to such an extent that he requires immediate medical attention, I authorize any official representative of Miles Christi to secure medical treatment on my son's behalf, including surgery and the administration of an anesthetic —if any of these are urgent and are immediately necessary— and I accept all financial responsibility for such treatment. I understand that my son is required to bring any medications previously prescribed for his health to the trip. If his medical condition does not require urgent assistance, I understand the authorities of Miles Christi will inform me about the situation before obtaining medical treatment

RELEASES AND INDEMNITY: I understand and hereby expressly acknowledge that the activities at the Young Men's Summer Camp (collectively referred to as the "Activities") might, under some circumstances about which I have been advised, or about which I reasonably should know, pose certain dangers, including, but not limited to, the risk of illness, sports injuries, other physical injury or accident. I hereby release, waive and discharge Miles Christi, and all of its officers, directors, agents, servants, employees, assigns and/or successors (collectively, "Representatives") from any and all liability, damage, loss or injury to my son's person or property or resulting in his death arising out of his participation in the Young Men's Summer Camp, including, without limitation, the Activities, whether such loss, damage, or injury is caused by the active or passive negligence of Miles Christi or any of its Representatives, or from some other cause. I hereby covenant not to sue Miles Christi, nor any of its Representatives, whether at law or in equity, or whether in contract or in tort, for any damages, costs, attorneys' fees or for any injunction or court order pertaining to or arising out of my son's participation in the Young Men's Summer Camp, including, without limitation, the Activities, whether any loss, damage, or injury is caused by the active or passive negligence of Miles Christi, or any of its Representatives, or from some other cause. In consideration of my son being permitted to participate in the Young Men's Summer Camp, I hereby agree to indemnify, defend and hold Miles Christi, and its Representatives, harmless from and against any and all liability, damage, loss, cost and expense incurred as a result of any claim, demand, or cause of action, brought against Miles Christi, or its Representatives, jointly or individually, for bodily injury or property damage suffered as a result of my son's negligent, reckless or willful act or omission in the participation (or failure to participate) in the various activities during the Young Men's Summer Camp.

I agree that if any provision of this waiver is found invalid or unenforceable by a court of competent jurisdiction, that provision shall be amended to achieve as nearly as possible, consistent with applicable law, the maximum permissible effect as the original provision, and the remainder of this release shall remain in full force and effect.

ACTIVITY: YOUNG MEN'S SUMMER CAMP | DATES: August 1-5, 2022

Signature of Parent or Legal Guardian:_

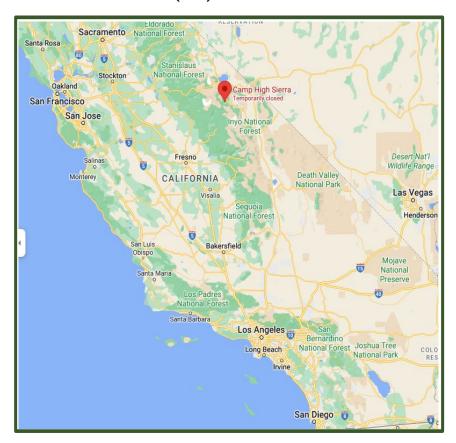
All of the following information will be kept confidential, unless required by a medical authority.

Participant's Name:		Birth Date:			
Address:					
Health Insurance Company:					
Name of Person to be notified	in case of emergency:				
Relationship:	Home #	Work #		Cell #	
Check applicable health condit	ions: Frequent Headaches:	High Blood Pressure:	Diabetes:	Heart Problems:	Asthma or
Respiratory Problems:Fair	nting Spells:				
Allergies (<i>Please specify</i>):					
Medication(s) Used:					
Describe/Explain Allergic React	tion(s) and Potential Side Effo	ects of Medication(s):			
Other Medical/Psychological P	roblems (<i>Please explain</i>):				
To better help the chaperones,	please describe any difficulti	es, medical or not, which your	son may have	examples: fear of the d	ark, homesickness,
		_			

Date:

Camp High Sierra

869 Lake Mary Rd. Mammoth Lakes, CA 93546 (760) 934-0745



From San Diego:

- Take I-163 NORTH follow signs for Escondido
- Merge onto I-15 NORTH
- Keep RIGHT at the fork to continue on I-215 NORTH follow signs for Riverside/San Bernardino.
- Take Exit 34A toward San Bernardino/Barstow.
- Merge onto I-215 NORTH. Continue straight to stay on I-215 NORTH.
- Merge onto I-15 NORTH.
- Take Exit 141 for US-395 toward Bishop/Adelanto
- Continue onto US-395 NORTH
- Take the CA-203 exit toward Mammoth Lakes/Devils Postpile
- Turn left onto CA-203 W
- Continue straight onto Lake Mary Rd
- Turn left onto Kelley Rd
- Turn right onto Majestic Pines Dr.
- Turn right at the 1st cross street onto Pinehurst Dr.
- Your destination will be on the left

Camp High Sierra 869 Lake Mary Rd. Mammoth Lakes, CA 93546