



# 2019 CATHOLIC RETREAT-O-REE

AN OVERNIGHT RETREAT  
FOR BOY SCOUTS, VENTURERS, GIRL SCOUTS,  
AMERICAN HERITAGE GIRLS,  
AND OTHER CATHOLIC YOUTH GROUPS

(All youth must be 6th grade or higher)

Sponsored by the Diocese of San Jose and  
the Catholic Committee on Scouting

Saturday and Sunday, BSA Camp Chesebrough  
Start: Oct. 19, 2019, 8:00am 26005 Highway 9  
End: Oct. 20, 2019 10:30am Los Gatos, CA 95033-9402

Cost: \$25/scout (\$35 after Oct. 14<sup>th</sup>)  
\$15/adult (\$25 after Oct. 14<sup>th</sup>)

(Partial funding of this retreat is made possible by the Catholic Community Foundation of Santa Clara County through the Office of Youth and Young Adult Ministry at the Diocese of San Jose)

Participants should come prepared for overnight camping bringing tents for all campers!  
Warm clothes and sleeping bags are a must!

ADVANCE REGISTRATION IS REQUIRED TO ATTEND - NO REGISTRATIONS AFTER 10/17/19  
Includes: Lunch and Dinner on Saturday and Breakfast on Sunday.

Individual registrations with an adult are welcome but units are encouraged to attend!  
All units must be accompanied by at least two adults.  
There **must** be an **adult female leader** with all groups with female participants.

To register, return this completed form and a "Permission, Health Authorization and Release" form for each participant and adult leader to:  
Catholic Scouting, care of Ann Resch, 1276 Cotterell Dr., San Jose, CA 95121  
For more information, call Bob Wedig at 408-735-0408, email [Bob@Wedig.com](mailto:Bob@Wedig.com) or  
Ann Resch at 408-227-8587, email [a.resch@att.net](mailto:a.resch@att.net)

LIGHT OF CHRIST



PARVULI DEI



PIUS XII



LEADER \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY/ZIP \_\_\_\_\_

EMAIL \_\_\_\_\_ CELL PHONE \_\_\_\_\_

UNIT # \_\_\_\_\_ NUMBER OF PARTICIPANTS \_\_\_\_\_ NUMBER OF LEADERS \_\_\_\_\_

AMOUNT ENCLOSED \_\_\_\_\_ (make check out to Diocese of San Jose)

CHECK ONE:  Boy Scouts  Venturers  Girl Scouts  Other Youth Groups

**IMPORTANT!! DUPLICATE AND HAVE EACH PARTICIPANT AND ATTENDING ADULT COMPLETE AND RETURN THE "PERMISSION, HEALTH AUTHORIZATION AND RELEASE FORM" ENCLOSED.**