



Sacred Heart Men's ACTS Retreat, LaSalle Retreat Center Sept. 24-27, 2020 Information & Registration Form

Parishioners of Sacred Heart are pleased to present the ACTS weekend retreat. This parish-based retreat offers the opportunity to renew your spirituality and prayer life, to strengthen your faith and its application in your daily life, and to build lasting friendships among members of the parish community. It is presented by members of our parish with spiritual direction from our parish priests and pastoral associates.

The retreat begins Thursday evening with check-in at 6:15 pm at Sacred Heart Church, and ends Sunday with a reception in the parish center following the 12:00 pm mass. Transportation to and from the LaSalle Retreat Center will be provided for all retreatants.

Donation for each retreatant is \$265, with \$50 due upon registration. The remaining \$215 is due at the Thursday check-in at the beginning of the retreat. **PLEASE NOTE: Financial difficulties should not prevent anyone from attending the retreat.** If you wish to inquire about a scholarship, or need further information regarding the retreat please contact:

Steve Kempf (Director) 314-852-1643

Reynolds Blackburn (Co-Director) 314-346-3164

Approximately 7-10 days prior to the retreat, you will receive a letter describing what to bring with you (clothing, reading material, etc.) for the weekend. Please contact one of the above people if you have any questions or need additional information.

Please submit this form and your registration fee (payable to Sacred Heart Church, memo section "ACTS Retreat") to Sacred Heart Church, 17 Ann Ave., Valley Park, MO 63088:

Name: _____ e-mail: _____

Name as you would like it on your name tag: _____

Street Address: _____

City/State/Zip: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Dietary Restrictions, please specify: _____

Medical needs/Physical restrictions (ex. Assistance with medical care needed, difficulty with stairs or walking, visual or hearing difficulty, etc.) please specify: _____

What accommodations might you need? _____

Emergency contact: _____ Home Phone: _____

Cell Phone: _____ Work Phone: _____

Family/Closest Friend: _____ Home Phone: _____

Cell Phone: _____ Work Phone: _____

I am a member of _____ parish