

# Holy Rosary Men's ACTS Retreat

March 19 -22, 2020

*"The Lord is my shepherd, there is nothing I shall want."*

Psalm 23:1

Director:	Brian Fitzgerald	979-733-7970
Co-Directors:	Sammy Condra	979-732-0623
	Andy Glueck	979-732-0268
Clergy:	Father Wayne Flagg	
	Deacon Doug Tromblee	

You are invited to join us to spend a weekend with God attending an ACTS Retreat. This is an opportunity for spiritual renewal and making new friends. Its aim is to enhance our relationship with Our Lord and with other Christian men who accompany us on this journey of faith. This retreat is hosted by Catholic men, with spiritual guidance from the Roman Catholic Faith. This experience will take place at Cathedral Oaks Retreat Center south of Weimar, Texas.

This retreat begins with Send-Off on Thursday evening, March 19th, at 5:30 pm in Mentz, Texas, at the St. Roch Parish Hall (transportation provided to and from the retreat) and ends with the Return Mass on Sunday, March 22, at 10:30 AM at St. Roch Catholic Church in Mentz, Texas. You will be contacted with more information when registration is complete.

Please return this registration form, along with a \$25.00 deposit to reserve your place. The cost of the retreat is \$175. The remaining \$150.00 will be due Thursday when you check in for the retreat. **Make checks payable to Holy Rosary ACTS.** (No one will be turned down due to financial difficulties. If you need financial assistance, please contact one of the directors to make arrangements.)

**Please mail registrations to Brian Fitzgerald, PO Box 355, Columbus, Texas 78934  
for more ACTS info go to [www.holyrosaryacts.com](http://www.holyrosaryacts.com)**

## REGISTRATION FORM

Name \_\_\_\_\_ Birthday (month/day/year) \_\_\_\_\_

Name as you want it to appear on your nametag \_\_\_\_\_

Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

E-mail Address \_\_\_\_\_ Parish Membership \_\_\_\_\_

### Emergency contacts:

#1 Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

#2 Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

Check Special Medical Conditions: \_\_\_\_\_ High Blood Pressure \_\_\_\_\_ Seizures \_\_\_\_\_ Diabetes \_\_\_\_\_ Special Diet Needs \_\_\_\_\_ Mobility

\_\_\_\_\_ Other Special Medical Conditions (explain on back)

Sleeping arrangements may include utilizing a top bunk. Would you be able to sleep in a top bunk? \_\_\_\_\_ Yes \_\_\_\_\_ No

T-shirt size (circle one) S M L XL XXL XXXL

Have you attended an ACTS Retreat before? \_\_\_\_\_ Have you ever previously applied to attend an ACTS Retreat? \_\_\_\_\_

Has your spouse attended an ACTS Retreat? \_\_\_\_\_

**Thank you, for saying "Yes" to God!**