



VOCATION OFFICE FOR THE
DIOCESAN PRIESTHOOD
ARCHDIOCESE OF PHILADELPHIA
HEED THE CALL

Quo Vadis Days 2022

Monday, June 27 - Thursday, June 30, 2022

REGISTRATION INFORMATION

Registration Deadline: Wednesday, June 1, 2022



General Camp Information:

- *Quo Vadis Days* is a 4-day camp run by the Vocation Office for the Diocesan Priesthood and the Philadelphia seminarians. This camp is held at Black Rock Retreat Center in Quarryville, PA. During this camp, high school men in Grades 9 to 12 (incoming freshmen to graduated seniors) participate in great talks and small group discussions, outdoor activities, sports, daily Mass and Liturgy of the Hours.

Registration Fee:

- The cost of registration includes optional bus transportation to and from the camp, any transportation during the event, all meals, lodging, activities, and supplies.
- The Vocation Office is making this camp available on a sliding scale basis. We recognize that this type of camp experience may be cost prohibitive for many and therefore we have set a sliding fee scale of \$25 to \$300. The Vocation Office relies on the generosity of donors to be able to offer this camp. If you are financially able to do so, we thank you in advance for paying on the middle to higher end of the scale.

Registration Deadline:

- The following completed and signed paperwork (by parent/guardian and participant where applicable) and registration fee are due at the Vocation Office no later than **Wednesday, June 1, 2022**.
 - Parental Permission & Medical Release Liability Form
 - Youth Code of Conduct
 - Terms and Conditions of Enrollment

Transportation to Black Rock Retreat Center:

- Transportation to and from Black Rock Retreat Center is the responsibility of the participant and his family or by using the provided optional bus transportation. *Any other arrangements must be communicated to the Vocation Office.* Students may be dropped off at or picked up directly from Black Rock Retreat Center. Drop off on Monday is at 9:30 am and pick up on Thursday is between 3:30 & 4:30 pm.
- Optional bus transportation is also available from St. Charles Borromeo Seminary, 100 E. Wynnewood Road, Wynnewood PA 19096 at *no additional cost*.
 - Monday, June 27th: Depart Seminary at 8:30 AM (arrive at 8:00 AM)
 - Thursday, June 30th: Arrival at Seminary by 5:00 PM

Meals:

- All meals, between lunch on Monday, June 27th, and lunch on Thursday, June 30th are provided. The campers will be sent home with a boxed snack Thursday afternoon. Please indicate dietary restrictions on the space provided on the Registration Form.

Questions:

- Any questions, please contact Jillian Minnich (jminnich@archphila.org) or Susan Matour (smatour@archphila.org) or by phoning the Vocation Office at 610-667-5778.

Mail all Forms and Fees to:

- Vocation Office for the Diocesan Priesthood, Attn: Quo Vadis 2022, 100 E. Wynnewood Road, Wynnewood, PA 19096. Payment must be in the form of a check or mail order made payable to *Vocation Office*. Credit cards are not accepted.



Quo Vadis Days: Monday, June 27 - Thursday, June 30, 2022

Parental Permission & Medical Release Liability Form

PARTICIPANT INFORMATION:

Participant Name: _____ Birthday: ____/____/____

High School: _____ Graduation Year: _____

Parish Name and City: _____

Parent/Guardian Name(s): _____ Parent E-Mail: _____

Home Address: _____

Home Phone: _____ Parent Cell Phone: _____

Adult Shirt Size: S M L XL XXL **Past Quo Vadis Experience:** 2018 2019 2020 2021

Gluten Free Hosts (*please select one*): I will need Gluten Free hosts I do not need Gluten Free hosts

TRANSPORTATION INFORMATION:

Transportation to and from Black Rock Retreat Center is the responsibility of the participant and his family or by using the provided optional bus transportation. *Optional bus transportation provided from St. Charles Borromeo Seminary at no additional cost.* Please indicate below the method by which your son will be traveling to Black Rock Retreat Center.

Monday: Transportation to Camp (*please select one*):

Thursday: Transportation Home (*please select one*):

I will drop by son off at Black Rock at 9:30 am

I will pick up my son at Black Rock by 4:30 pm

Bus: St. Charles Seminary (Wynnewood) 8:30 am

Bus: St. Charles Seminary (Wynnewood) 5:00 pm

Permission to Transport During Quo Vadis Days Camp

During the course of the camp, there may be opportunities to go offsite for various teambuilding activities. There is no additional fee for this transportation. Please check below:

As the parent(s)/guardian(s) of the child named above, I (we) give consent to the Vocation Office to transport my (our) son offsite during Quo Vadis Days through vans, buses, or other forms of transportation available to the activity. I (we) understand that the driver and chaperones will follow all Archdiocesan transportation and youth protection policies during transportation of my (our) son during and throughout the activity.

I (we) give permission for my (our) son to be transported to offsite locations for team building activities.



GENERAL HEALTH & MEDICAL HISTORY FORM

If the participant has been under the care of a physician within the past 12 months and there is any question about restriction, please attach a statement from the physician indicating restrictions and noting any pertinent recommendations.

Health Insurance: _____ Policy Number: _____

Participant's Physician: _____ Phone Number: _____

Known allergies:

Food Drugs Plants Animals Insects Other

Please specify allergen, reaction, and medication(s) used to treat (*please bring medication in original container*): _____

Medication Use: Please list medication(s) used, including insulin. All medications must be brought in original container with prescription and/or store label. *Use back of form if needed.*

Medication: _____ used for _____

Medication: _____ used for _____

Medication: _____ used for _____

Please check if participant is prone to any of the following conditions:

- | | | |
|--|--|--|
| <input type="checkbox"/> Upset Stomach | <input type="checkbox"/> Frequent headaches | <input type="checkbox"/> Fainting |
| <input type="checkbox"/> Asthma/Respiration problems | <input type="checkbox"/> High blood pressure | <input type="checkbox"/> Convulsions |
| <input type="checkbox"/> Restlessness/Sleepwalking | <input type="checkbox"/> Heart problems | <input type="checkbox"/> Other (<i>i.e. recent concussion</i>) |

If any of the above are checked, please give details: _____

Dietary Restrictions: Please provide any dietary restrictions (*ie, dairy, gluten, eggs, etc*):

Special Circumstances: Please provide any known physical, mental, social difficulties or other information which may affect participation and/or for which special consideration should be given (*please explain on additional sheet if needed*):

Over the Counter Medication: Knowing that the following will be administered by a registered nurse, I give permission for my son to receive the following:

Advil Tylenol Mylanta Roloids Tums Imodium



EMERGENCY CONTACT:

I (we) understand that I (we) am (are) the primary contact(s) for my (our) son, but in the event I (we) cannot be reached, the following person is authorized to act on my behalf:

The Emergency Contact should be someone other than a parent / guardian.

Name: _____

Address: _____

Cell Phone: _____ Relation to Participant: _____

LIABILITY RELEASE:

I, _____, as the participant at Quo Vadis Days Camp, will assume responsibility for restricting any activities agreed upon and listed above or on attached paperwork. I will exercise good judgment regarding my own health, safety and well-being, while participating in this program.

I (we), as parent(s)/legal guardian(s) of _____, grant permission for him to participate in *Quo Vadis Days* at BlackRock Retreat Center, 1345 Kirkwood Pike, Quarryville, PA 17566 from Monday, June 27, 2022 - Thursday, June 30, 2022. I (we) understand that he may not leave early without my (our) written permission.

In the event of a medical emergency, I (we) authorize a call may be made to 911 for emergency medical attention and consent to my (our) son receiving necessary medical treatment until I (we) or the emergency contact listed above can be notified, and I (we) agree to be responsible for the payment of such treatment.

Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Participant Name: _____

Participant Signature: _____ Date: _____



Quo Vadis Days: Monday, June 27 - Thursday, June 30, 2022

Youth Code of Conduct

Youth Participants WILL:

- Project an image of Christian consideration, sensitivity, and respect to everyone and to the property around them through language, dress, and behavior.
- Respect other persons and/or property.
- Adhere to any COVID-19 precautions in place at the time of the camp.
- Adhere to stated curfews.
- Attend all scheduled activities, arriving promptly, and staying for the entire activity.
- Heed any and all directions of Vocation Office staff, seminarians, clergy and Black Rock Retreat staff.
- Be aware of noise levels in lobbies, hallways, and sleeping areas, especially later in the evenings.
- Maintain the spirit of the event.
- Report problems of any kind to a trusted adult.

Youth Participants WILL NOT:

- Use foul/inappropriate language.
- Possess weapons of any kind.
- Purchase, possess, consume, or distribute alcohol and/or illegal drugs.
- Engage in any form of bullying or any form of sexual activity or peer sexual harassment, or any kinds of inappropriate touching or harassment.
- Engage in behavior that could result in injury to him and/or other camp participants and/or chaperones.
- Damage or deface property. Damage or defacing of property will be the financial responsibility of the participant involved and his parents/legal guardians.
- Leave the premises unless accompanied by an adult leader, parent or legal guardian.
- Visit or gather in sleeping rooms with other Quo Vadis Days staff or participants, or any other individuals at Black Rock Retreat Center.

Youth Participant Sanctions for Non-Compliance:

If a young person violates the Youth Code of Conduct, any or all of the following sanctions may be implemented:

- Dismissal of the youth from event and possibly future events (whereby it would become the responsibility of parent/guardian to ensure timely, accompanied, and safe transportation home).
- Minor violations of the Rules of Conduct will be judged at the discretion of the Vocation Director with the collaboration of other chaperones for minor punishments. Minor punishments may include the non-participation of the participant for one or more of the activities. Punishments may also take the form of cleaning and writing apologies.

My (our) signature below acknowledges that I (we) understand and agree with the terms of the Code of Conduct. I (we) realize and agree that if I (we) / my (our) son violates these rules as determined by the Vocation Office for the Diocesan Priesthood and/or Black Rock Retreat Center, I (he) may lose the privilege of attending a scheduled activity or may be sent home at my (our) family's expense. I (we) also understand that I (we) will be responsible for all financial and other consequences of my / his behavior, including damages to the building, facilities, or property.

Participant Name: _____

Participant Signature: _____

Parent/Guardian Printed Name: _____

Signature of Parent/Guardian: _____ Date: _____



Quo Vadis Days
June 27 - June 30, 2022

Terms and Conditions of Enrollment
& Release of Liability

Assumption of Risk

I (we) understand that part of the camp experience involves activities, arrangements, and interactions that may be new to my (our) son, and that they come with certain risks and uncertainties beyond what my (our) son may be used to dealing with at home. A large component of this is team building activities, but it is not exclusive of this component. I (we) am (are) aware of these risks, and I (we) am (are) assuming them on behalf of my (our) son. I (we) understand that neither Black Rock Retreat Center, the Vocation Office for the Diocesan Priesthood, nor the Archdiocese of Philadelphia are responsible to provide insurance or financial assistance related to any of these risks, and expressly waive any claim for such compensation. I (we) realize that no environment is risk free, and so I (we) have instructed my (our) son on the importance of abiding by the camp’s rules, and I (we) and my (our) son both agree that he is familiar with these rules and will obey them.

Trip and Photo Permission

I (we), as the parent(s)/guardian(s), give permission for my (our) son to participate in all activities of *Quo Vadis Days* at Black Rock Retreat Center.

I (we), as the parent(s)/guardian(s), give permission to have photographs/videos and audio-recordings taken of my (our) son which will be used in printed materials, on social media, or for other media for promotional purposes for the Vocation Office of the Diocesan Priesthood, St. Charles Borromeo Seminary, or the Archdiocese of Philadelphia.

Waiver and Release

I (we), on behalf of myself (ourselves), my (our) heirs, next of kin, spouse, and legal representatives, hereby release, waive, discharge from, and agree not to sue Black Rock Retreat Center, the Archbishop of Philadelphia, or the Vocation Office for the Diocesan Priesthood or any lessor of the premises, along with their respective affiliates, successors, and assigns, and their respective members, directors, officers, employees, volunteers, agents, contractors, and representatives (collectively “Released Parties”) for any and all claims, costs, liability, or damages of any injury, illness (including COVID-19), death, or loss of property resulting, directly or indirectly, from any activities of *Quo Vadis Days* at Black Rock Retreat Center except if caused by the gross negligence or intentional

misconduct of any of the Released Parties which shall not be imputed to the other Released Parties.

Indemnity

If, despite the Waiver and Release above, I (we) or anyone on my (our) behalf makes a claim against any of the Released Parties, I (we) will indemnify, save, and hold harmless each of the Released Parties from any litigation expenses, attorney fees, loss, liability, damage, judgment or cost which may be incurred as the result of such claim.

Severability

These Terms and Conditions of Enrollment are intended to be as broad and inclusive as is permitted by applicable law and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Personal Property

Black Rock Retreat Center, the Vocation Office for the Diocesan Priesthood and the Archdiocese of Philadelphia are not responsible for lost or stolen property (cameras, etc.). Cell phones are NOT allowed during *Quo Vadis Days* and are only to be used with permission of one of the chaperones.

Cancellation, billing, and refund policies

The non-refundable registration fee for the camp is due by **June 1, 2022**. In the event *Quo Vadis Days* Camp is cancelled due to reasons involving COVID-19, however, by Black Rock Retreat Center, the Vocation Office for the Diocesan Priesthood or the Archdiocese of Philadelphia, participants may receive a partial refund (*amount to be determined at the time*). Cancellation will be determined by considering and following local, state, and national policies involving COVID-19.

A \$35 charge will be made on any returned checks.

There is no allowance or refund for any absences, missed days, late arrival, dismissal, partial week, or early withdrawal of participant during the *Quo Vadis Days*.

By signing below, I (we) state that I (we) have read and understood the Terms and Conditions of the *Quo Vadis Days* Camp, as specified above, and held from June 27 - June 30, 2022.

Printed name of Parent or Guardian

Signature of Parent or Guardian

Date



Black Rock Retreat

Activity Participation Agreement

Participant Information *(To be completed by participant or authorized guardian)*

Name of participant: _____

Name of parents/guardians(if under 18): _____

Address: _____ Telephone: _____

Name of emergency contact: _____

Telephone (Day): _____ Telephone (evening): _____

Activity Information

Black Rock Retreat's Challenge Ropes Course is constructed and maintained to meet the ACCT safety standards, the generally accepted national standards for ropes courses. The course is designed to minimize the risk of serious injury. However, these activities are physically and emotionally demanding and potentially dangerous. Each participant assumes the risk of injury in these activities. Black Rock Retreat's ropes course program activities are strictly voluntary and the level of participation is up to each individual. Please consult with your primary care physician prior to attending with questions about your approved level of participation. Certain activities have age and height restrictions. The weight limit for all high ropes elements, including zipline, is 250lbs.

Participation Agreement

I acknowledge that participation in the activity described above involves risk to the Participant (and to Participant's parents or guardians, if Participant is a minor), and may result in various types of injury including, but not limited to, the following: sickness, bodily injury, death, emotional injury, personal injury, property damage and financial damage.

In consideration for the opportunity to participate in the activity described above (the "Activity"), the Participant (or parent/guardian if Participant is a minor) acknowledges and accepts the risks of injury associated with participation in and transportation to and from the Activity. The Participant (or parent/guardian) accepts personal financial responsibility for any injury or other loss sustained during the Activity or during transportation to and from the activity, as well as for any medical treatment rendered to the Participant that is authorized by the Sponsor or its agents, employees, volunteers, or any other representatives (collectively referred to hereinafter as the "Activity Sponsor"). Further, the Participant (or parent/guardian) releases and promises to indemnify, defend, and hold harmless the Activity Sponsor for any injury arising directly or indirectly out of the described Activity or transportation to and from the Activity, whether such injury arises out of the negligence of the Activity Sponsor, the Participant, or otherwise.

If a dispute over this agreement or any claim for damages arises, the Participant (or parent/guardian) agrees to resolve the matter through a mutually acceptable alternative dispute resolution process. If the Participant (or parent/guardian) and the Activity Sponsor cannot agree upon such a process, the dispute will be submitted to a three-member arbitration panel for resolution pursuant to the rules of the American Arbitration Association.

Signature: _____ Date: _____
(Participant)

Signature: _____ Date: _____
(Parent or Legal Guardian if participant is a minor)