

Men's ACTS - Recovery Retreat

November 30 – December 3, 2017

St. Mark the Evangelist Catholic Church

"O Lord, you are our father; we are the clay and you our potter: we are all the work of your hand."

Isaiah 64:7

St Mark's presents the 2017 Men's ACTS/R retreat weekend November 30 - December 3, 2017. The goal of the retreat is to deepen your relationship with Jesus Christ, renew yourself spiritually and give new meaning to your prayer life. This Retreat focuses on men who have been affected directly or indirectly by addictions.

The retreat begins Thursday evening, November 30, and ends Sunday, December 3 following the 12:00 Mass at St. Mark's Church. After Mass there will be a gathering at the Church for light refreshments and fellowship. Round trip transportation is provided for all retreatants, leaving on Thursday evening from St. Mark's Church. Attendees from the Kerrville area will meet at Notre Dame Catholic Church in Kerrville. The cost for the retreat is \$175.00. Please enclose \$175.00 or a deposit of \$75.00 with this application. The remaining \$100.00 is due at the Thursday, November 30, check-in. Make checks payable to St. Mark the Evangelist Catholic Church.

Please note: Financial difficulties should not prevent anyone from attending the retreat. If you are unable to pay all or part of the fee, financial arrangements can be made by contacting Steve Treu at 210-860-6365. Please mail or deliver your registration form and fee to: Men's ACTS/R Retreat c/o St. Mark the Evangelist Catholic Church, 1602 Thousand Oaks Drive, San Antonio, TX 78232-2398. You will receive a letter 10 to 14 days prior to the retreat that will list the items you should bring with you for the retreat. If you need any additional information regarding the retreat, please contact Steve Treu at the number listed above.

Name		_ Street Address		
City/State/Zip Code				
Home Phone		Work Phone		
Cell Phone		E-mail Address		
Please provide contact na	ames: (Family and/or friends)			
1. Name	Home Phone	Cell/Work	Relationship	
2. Name	Home Phone	Cell/Work	Relationship	
3. Name	Home Phone	Cell/Work	Relationship	
What is the name of the p	arish or church you attend ar	nd where is it located?		
Please list any medical or	dietary needs that you may h	nave during the retreat.		
T-Shirt size	. Do you have trouble climbir	ng stairs or need any speci	al accommodations?	