



Chrysalis December 11-13, 2009

Name: _____

Gender: M _____ F _____ Phone: _____

Mailing Address: _____

City: _____ Zip Code: _____ Phone: _____

Age: _____ Grade: _____ School: _____

Mother: _____

Address: _____

City: _____ Zip Code: _____ Phone: _____

Father: _____

Address: _____

City: _____ Zip Code: _____ Phone: _____

Name of Church and Pastor: _____

Cost of the weekend is **\$50.00**. Scholarships are available to help you attend if needed.
Please return this application with a **NON-REFUNDABLE \$10.00** deposit.
Return applications to **PO Box 1267, Helena, MT 59624**

Do you have a physical condition/s or an illness that might need special consideration during a three day retreat? If so, please describe:

Prescription Medications and Allergies:

Special Dietary Needs or Desires: _____

Name and Phone Number of Physician: _____

Insurance Co. _____

Policy #: _____ Group #: _____

Additional parent comments:

What is Chrysalis?

Chrysalis is a growth stage between caterpillars and butterflies. As the caterpillar is in the chrysalis it may look as if nothing is happening—at least to the naked eye, but a delicate process changes the caterpillar into a beautifully colored and exquisite butterfly. This symbolizes that through dying to self, Christ can transform us into new beings.

Chrysalis symbolizes the faith growth in the lives of youth ~ the spiritual growth that is necessary between adolescence and adulthood. It is a crucial time of maturing faith for discipleship.

What happens at Chrysalis?

You will spend three days with other young people in worship, prayer, fellowship, recreation, laughter, singing and discussion. You will hear talks given by youth and adults. You will experience the love of a community through acts of kindness and prayer.

Who can attend?

Sophomores, Juniors and Seniors in high school may attend Chrysalis. This weekend is open to youth from **ALL** denominations and faith families. **You do not need to be actively involved in a church to participate.**



Your Sponsor's Name: _____

Mailing Address: _____

City: _____ **Zip Code:** _____

Phone: _____ **Cell:** _____

I understand my teenager, _____ will be attending a weekend retreat at St. Paul's United Methodist Church, 512 Logan, Helena, MT 59601, beginning on **December 11, 2009 and ending on December 13, 2009.**

The undersigned parent or guardian of the above named minor hereby consents to x-ray, examination, Anesthetic, medical or surgical diagnosis or treatment and hospital service that may be rendered to said minor under the general or specific diagnosis or treatment which may be required. This consent is given to encourage St. Paul's United Methodist Church, adult Chrysalis volunteers, hospital staff and any physician to exercise their best judgment as to the requirement of any such diagnosis or treatment. Should my teenager need immediate medical help for any reason please render whatever proper medical aid is necessary and notify the undersigned parent or guardian as soon as possible.

Signature of Parent / Guardian: _____ **Date** _____

Signature of Candidate: _____ **Date** _____

Chrysalis 2009

Name: _____

Gender: M F Age _____ Grade _____ School _____

What is your favorite color? _____

What is your favorite food? _____

What is your favorite sport? _____

What is your favorite movie? _____

What is your favorite music group? _____

What is your favorite snack food? _____

What is your favorite Disney Movie? _____

What is your favorite movie? _____

What is your favorite candy? _____

Who is your favorite actor? _____

What is your favorite memory? _____

Do you have any hobbies? _____

Do you have any pets? _____

Do you have siblings? _____

What is your greatest wish? _____

If you could go anywhere in the world where would it be? _____

Where do you see yourself in 5 years? _____

10years? _____

