



PARTICIPANT CONTRACT

Participant Name: (print First and Last) _____

Email: _____ Phone: (_____) - _____ - _____

Parent/Caregiver (print First and Last): _____

Email: _____ Phone: (_____) - _____ - _____

Home Address: _____

School/Parish/Organization: _____ Participant Age: _____

☐ Student or ☐ Chaperone

Class (circle one): Middle School: 6-8 | High School: FR SO JR SR | College: FR SO JR SR

Any accessibility accommodations?:

I realize that living and working together in “virtual community” will require me to display patience and respect toward all members of the group. I realize the importance of following a schedule and the guidance and instruction of the leaders as well as being fully present to the group gathered. I am willing to comply with the requests of the leadership and be flexible with what is asked of me.

In small groups, in one-on-one conversations, and in personal reflection time, I am willing to go beyond surface level ideas/responses and challenge myself to think deeply and hold nuances. I realize that I will be learning about and discussing ideas, cultures, and customs which may differ from my own. I will treat all people I meet and talk to with respect and honor their human dignity.

I am aware that the experience may involve a focus on prayer based on the Catholic tradition. I am open to this experience and will actively participate to the degree to which I am able.

Unless I am experiencing an unavoidably poor internet connection, I will have my camera on when I am able and be fully present to the group during the scheduled sessions. I will hold myself accountable to not engage in outside communication, browsing, or social media while engaged with the Darst Center. I dedicate myself to be an active participant in this experience of education, prayer, simplicity, and community as an experience of living justice. While on retreat, I will be mindful to take actions that promote environmental sustainability and justice to embody the experience of this retreat with the Darst Center.

Signature: _____ Date: ____/____/____

Parent/Caregiver Signature (if under 18): _____

Date: ____/____/____