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# Holy Trinity Catholic Church



# Women's ACTS Retreat Registration



"Give thanks to the Lord for He is good; His mercy endures forever."

Psalm 118:1

April 5-8, 2018

For More Information, contact: Director Jennifer Bishop 210.264.8078 Co-Director Katy Cantu 210.887.0612

## Retreatant Information

You are invited to attend our Holy Trinity Catholic Church women's ACTS Retreat the weekend **April 5-8,2018**. Our Retreat will be held at the Cordi Marion Retreat Center in San Antonio.

An ACTS Retreat is a three day, three-night Catholic lay retreat presented by fellow parishioners like you. Holy Trinity ACTS Retreats are held in special, peaceful and quiet environments.

An ACTS weekend is a chance to relax and focus on your faith journey. Holy Scripture and the teachings of the Catholic Church are the guide for the movement. Spiritual direction will be available.

The Retreat begins at 5:30 Thursday evening (with check-in) and ends with Mass at Holy Trinity Catholic Church at 11:15 a.m. on Sunday. The Mass is followed by a reception for Retreatants, their families and members of the ACTS community. Transportation for Retreatants is provided to and from the retreat center.

### What is ACTS?

ACTS Stands for:

ADORATION, COMMUNITY, THEOLOGY and SERVICE

The purpose of an ACTS weekend is to instill in the Retreatant a new or deeper relationship with the Lord and fellow parishioners. The cost per person is \$175, towards which your \$25 deposit is applied. The balance is due upon arrival Thursday evening at Holy Trinity Catholic Church. This covers all meals, lodging and transportation to and from the retreat center. Please do not let the cost of the retreat keep you from participating. If the cost is an issue or if you have any other questions, please contact:

Director Jennifer Bishop 210.264.8078 Co-Director Katy Cantu 210.887.0612

#### Please write legibly

Name:
Address:
City: State: Zip Code:
Cell Phone No:
Email Address:
Date of Birth:
Are you a Holy Trinity Parishioner? [ ] YES [ ] NO
Have you attended an ACTS retreat before? [ ] YES [ ] NO
Are you married: [ ] YES [ ] NO
Shirt Size (Please circle one): S M L XXL
Emergency Contact:
Name:
Relation:
Cell Phone Number:
Do you have any special needs that we should be aware of, such as dietary, medical, etc?
[ ] YES [ ] NO <u>If you checked YES, please describe below:</u>

Please return your completed form and **\$25** non-refundable deposit to any ACTS Team Member **or** The Parish Office (Mon-Thur 9am – 8pm, Fri 9am – 5pm, Sat 9am - Noon).