

March 19-21, 2005
SAT. 10 a.m. to MON. 7p.m.

T.E.C. 42

FOR OFFICE USE ONLY	
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FEE	_____
CMPTR	_____

ST. WILLIAM'S TEENS ENCOUNTER CHRIST

APPLICATION FOR

(Check one) **CANDIDATE**___ **ADULT OBSERVER**___ (21 or older)

PLEASE PRINT ALL INFORMATION:

DATE: _____

NAME(First) _____ (Initial) _____ (Last) _____ MALE/FEMALE(Circle)

ADDRESS (Mailing address where you would like all T.E.C. information sent)

STREET _____

TOWN _____ STATE _____ ZIP CODE _____

PHONE NUMBER Area Code and Number _____ E-MAIL _____

DATE OF BIRTH Month, Day and Year _____

SCHOOL PRESENTLY ATTENDING _____ Grade _____

RELIGION _____ ARE YOU BAPTIZED? _____

PARISH _____ PASTOR _____

MOTHER'S FIRST NAME (First & Last) _____ PHONE # _____

MOTHER'S ADDRESS(Street, Town, State, Zip code) _____

FATHER'S NAME (First & Last) _____ PHONE # _____

FATHER'S ADDRESS(Street, Town, State, Zip code) _____

YOUR MARITAL STATUS (For Observers) _____ SPOUSE'S NAME _____

DO YOU KNOW ANYONE ELSE MAKING THE WEEKEND YOU ARE APPLYING FOR? _____

IF YES, GIVE THEIR NAMES(S) _____

REFERRED BY (Who recommended you attend this T.E.C.?) _____

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THE TOTAL COST OF THE OF THE WEEKEND IS \$40. A \$20 NON-REFUNDABLE FEE MUST ACCOMPANY THIS APPLICATION.

**TEENS ENCOUNTER CHRIST
ST. WILLIAM'S CHURCH
1351 MAIN STREET
TEWKSBURY, MA. 01876**

The T.E.C. weekend is open to people in Grade 10, 15 years old and older.
Candidates and Observers please complete all information on both pages of this application and return to the above address.

THIS APPLICATION MUST BE RETURNED BY WEDNESDAY March. 9, 2005

For more information and an on line application go to <http://www.tewksbury.com/stwilliams/TEC.htm>

PLEASE ANSWER THE FOLLOWING QUESTIONS:

1. How did you find out the weekend?
2. Are you disabled, on medication, or do you have any allergies (to foods, fabrics, dust, etc.) that we should know about?
3. Do you play a musical instrument? (If so, which one do you play?) **YOU CAN BRING A GUITAR OR PORTABLE INSTRUMENT WITH YOU.**
4. Have you ever participated in your school's athletic, dramatic or student government activities? Briefly describe how you were involved.
5. How many brothers and sisters do you have? _____Brothers _____Sisters
6. Have any of your family members made an encounter weekend before? If so, give their names.
7. What are your plans for next year?
8. Why do you wish to make a weekend?
9. Have you ever made a high school retreat, SEARCH, or other religious program before?
10. Are you involved in any way in your church?
11. About how many years of formal religious instruction have you had, if any? (in Parochial School, Religious Ed., Bible School, taught about God by family, etc.)

SIGNATURE OF PERSON APPLYING FOR THE WEEKEND & PARENT/GUARDIAN

(signed)

Signature of Parent/Guardian if candidate is under 18

Give us the name and phone number of an adult reference we can contact

Name of Adult Reference _____ Phone No. _____

RETURN THIS APPLICATION BY WEDNESDAY, March 9, 2005