

TEC Adult Observer Application
(Please Print)

Dates of TEC Weekend: December 11-13, 2009 Application Deadline: Nov. 15, 2009

Name: _____ Gender: M F

Phone (Home/Cell): _____ Work: _____ E-Mail: _____

Address: _____ City: _____

State: _____ Zip: _____ Parish: _____ Birthdate: _____

Place of Employment and Position (if applicable): _____

List any involvement you have with parish/community programs: _____

How did you hear about TEC? _____

Why are you interested in making a TEC weekend? _____

List the names of others (teens/adults) who are applying to be on the same TEC weekend:

In case of emergency, please contact: _____
Name & Telephone Number Relationship

Any special health conditions: _____

I wish to participate in the TEC weekend and plan to stay the entire weekend at Conception Abbey. I agree to hereby release, indemnify and save harmless Conception Abbey, Conception Seminary College, the Diocese of Kansas City-St. Joseph, the Heartland TEC Board, National TEC, and any persons connected with the Abbey or TEC weekend from any and all liability, claims, damages for personal injury, or property loss/damage which may arise as a result of this retreat. I agree not to sue any of the above parties, their representatives, agents, employees, or volunteers.

Signature

Date