Dear Parents:

As you likely know, your son is scheduled for his retreat on the weekend of ______________. Built on the success of the freshman retreat program, the sophomore retreat is designed to help sophomores continue to make the Delbarton experience their own.

This retreat experience is unique in that it involves parents as well. That’s right! You are a part of this retreat too! The retreat includes a **Sunday morning session for students and parents**. You will be in a discussion group with students other than your son. Parents and students will be divided into these groups for role-plays. Please meet in the student cafeteria at **9:00 a.m. on Sunday**. Following this parent/student session, we will celebrate **Sunday Mass at 11:00 a.m. in the Abbey Church**. Other members of the family are most welcome to join us for this liturgy. A brief reception with light refreshments will follow in the student cafeteria. Please make every effort to attend this reception, for it is an important part of the retreat experience. The retreat concludes **after the reception around 12:30 p.m.**

Occasions for prayer and the celebration of the Sacraments of Reconciliation and Eucharist are also available on this retreat. Once again, a highlight of the weekend is the **letters of affirmation**. You and the members of your family and friends are strongly encouraged to write your son a letter of affirmation. So often we take each other for granted. An affirming letter during a retreat is always the turning point of the weekend. Please send your letters directly to me. Due to the delays with the mail, I recommend that you bring them to me personally or send them to school with your son in a sealed envelope with the enclosed medical release form. If you get pressed for time, you can also e-mail them to me at dhajduk@delbarton.org. However, I would like to discourage you from sending these letters by e-mail – there is something quite different about receiving a handwritten letter! Every sophomore should receive some letters from family and friends. It would be truly disappointing for your son if he were the only one without any letters from home! Some parents can be tempted to think that since they wrote their son a letter last year, they do not need to write him another one this year. I would like to discourage this type of thinking. The boys really do eagerly anticipate receiving the letters, and, to tell you the truth, you really can never communicate love and support too many times.

In order that the retreat may run smoothly and to ensure that every boy has the opportunity to have a blessed experience, we ask that you discuss the following behavioral guidelines with your son:

- Even though the retreat will be fun and will include games, the retreat isn’t “fun and games.” It is a spiritual experience, and a time to take a good look at ourselves and our relationships with God and others. Our behavior should reflect this.
- It should go without saying that any illicit drugs or alcohol are strictly forbidden. Any prescription medications should be given to a faculty chaperone upon arrival for safe keeping and distribution.
- Computers, Game Systems, portable DVD players, and the like are not permitted on the retreat.
- **We discourage the boys from taking their personal cell phones on the retreat.** The boys are inclined to play games, text-message one another, etc. (even during the sharings and small groups meetings), and I have found a number of them on the phone with friends after midnight when they really should be sleeping. If you need to be in touch with your son or me for
emergency purposes during the retreat, you can call the Campus Ministry cell phone, (973) 229-2261. Thank you for your understanding.

* For school retreats, the Abbey Retreat Center is a food free and smoke free environment. **Snacks will be provided in the cafeteria at designated snack times.** No student should bring any food, candy, or drink in their rooms or common spaces at the retreat center at any time (unless they need to do so for health reasons which have been discussed with me in advance). Please help us to maintain a clean environment at the center, which welcomes over 46 groups and 2200 people each year, and impress upon your son the need to do the same.

* Any failure to comply with the Delbarton Code of Behavior or the behavioral guidelines discussed here may result in disciplinary action on the part of the school.

To cover the expenses for the weekend, you will be billed _____________ by the business office. This cost is adjusted or dispensed upon request if it presents a problem in any way. No one will be excluded from this great Delbarton tradition because of financial difficulties.

Your son should bring along toiletries, recreation clothes, and casual clothes suitable for school or church. Sheets and towels will be provided. **Sophomores should arrive at the retreat center on Friday at 7:00 p.m. Please see that your son has eaten dinner.**

With every good wish and prayer for you and your family, I remain,

Sincerely in the Lord,

David C. Hajduk
Director of Campus Ministry

P.S. Please complete the medical release form. As previously stated, this form can be submitted with the letters of affirmation. Kindly, put the medical release form in a separate envelope and mark it as such.

“Let them prefer nothing whatever to Christ, and may He bring us all together to everlasting life.” (RB 72:11-12)
DELBARTON SCHOOL SOPHOMORE RETREAT PROGRAM

Delbarton School
230 Mendham Rd.
Morristown, NJ 07960

Location: St. Mary’s Abbey Retreat Center       Date of Trip: _________________

Time and Place of Departure: N/A

Estimated Time of Arrival back at Delbarton: N/A

I, ________________________________, parent or legal guardian of ________________________________,
give my permission for him to attend the above trip, and authorize any medical treatment in case of
an emergency. I agree to hold harmless Delbarton School, its employees and agents from any injury
or sickness occurring during this trip.

Medical Information

<table>
<thead>
<tr>
<th>Emergency Contact:</th>
<th>Insurance Information:</th>
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<tbody>
<tr>
<td>Home Phone:</td>
<td>Work Phone:</td>
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Please list any special medical or physical needs or conditions the chaperones should be aware of:

________________________________________________________________________

Signature of parent or legal guardian: ________________________________

Date: ________________________________

** Name(s) of those attending the Sunday morning session at 9 a.m.

________________________________________________________________________