



COVER SHEET

Please scan and send by email to journey@ncdsb.com

From:

School Name: _____

Teacher contact: _____

Date of Retreat: _____

Attached:

1. Chartwell meal form (#s) - **ONE WEEK PRIOR TO RETREAT**
2. Dorm Assignment
3. Small Group Assignments

Special notes:

CHARTWELLS catering information for Journey Retreat

Please submit 1 week prior to retreat – thanks!

Email: journey@ncdsb.com

If it is not received on time, you will be billed for the numbers estimated through School Board information.

SCHOOL _____ Retreat Dates _____

Principal _____ # Students _____

Grade 8 Teacher (s) _____

School staff chaperoning retreat - meals during retreat:

	Breakfast (#)	Lunch (#)	Dinner (#)
Day One			
Day Two			

Additional meals for family night:

Priest _____ Parents _____ School Staff* _____ TOTAL ADDITIONAL MEALS: _____

* Do NOT include Gr.8 teacher's listed above in this number

Dietary Concerns:

Please NOTE: We are a NUT-FREE FACILITY!

Students _____

Teachers _____

Parents _____

I confirm that the above numbers are accurate and understand that the school we will be billed accordingly.

Date form Sent _____ Name _____

Signature _____ Initialed Day 1 of Retreat _____

Chartwells' Use Only

HS Students	Lunch (#)	Dinner (#)
Day One		
Day Two		
Journey		
Day One		
Day Two		
Other		

Dinner totals for prep		
Students		
Priest(s)		
Parents		
Staff (chaperones)		
Additional School Staff		
Other		
TOTAL:		

JOURNEY RETREAT SMALL GROUPS

Please divide your class into groups of 7 or 8 students. These groups will be used for Kitchen Clean Up Duties and 2 or 3 times for Small Group Activities throughout the Retreat. Add more groupings if necessary.

GROUP 1 _____

GROUP 2 _____

GROUP 3 _____

GROUP 4 _____
