

WHAT WOULD IT FEEL LIKE...

- To develop and have closer relationships and improved communication with the people about whom you care most?
- To break through the beliefs you have about yourself that have prevented you from getting what you want out of life?
- To get clear about your goals and dreams and what you want in your life in the areas of love, friendship, community, and connection to G-d?
- To improve your self-confidence and your belief in your own power to change yourself and the world?

FIND OUT AT HEART, MIND & SOUL.

While our programs are open to Jewish youth of all denominations and backgrounds, Shabbat and Kashrut are strictly observed on Heart, Mind & Soul. Parents and potential participants are strongly encouraged to visit our website at <http://www.heartmindandsoul.org> for more information about our programs and our organization. Additionally, we welcome your inquiries and can also be reached via phone at 860.523.4102 or via e-mail to info@heartmindandsoul.org.

HEART, MIND & SOUL INVITES YOU TO EXPERIENCE AN INCREDIBLE, ENJOYABLE, AND POWERFUL WEEKEND THAT YOU WILL NEVER FORGET...!

Next Program:

*Boca Raton, Florida
Check heartmindandsoul.org for info!*

HEART, MIND & SOUL
A NATIONAL HERITAGE FOUNDATION
99 BREWSTER ROAD
WEST HARTFORD, CT 06117

HEART, MIND & SOUL

(Open Me!)

HEART, MIND & SOUL

Spend an unforgettable Shabbat and long weekend with Jewish teens and young adults, and be part of an incredible experience that can help you to improve your relationships with your family, your friends, and especially with yourself. Together with other Jewish high school and college students, you will take a big step closer to your goals and the life you want to have..

Attendance is limited to you and 15 other participants. This is to assure that everyone has the personal attention necessary to accomplish his or her personally-selected objectives. The Shabbaton/workshop is run by a trained and experienced team of youth leaders, social workers, and two facilitators—each with a minimum of 2,000 hours of specialized instruction. Another twenty assistants—all of whom have participated in this program themselves and are trained to assist—will be on hand to make sure you have an amazing time and get everything you want from the program.

The program begins before Shabbat and ends at 9 P.M. on Monday evening. For more information, contact Rabbi Shimmy Trencher, MSW at 860.523.4102 or Rabbi Yaakov Green at 561.702.4768, or visit our web site at <http://www.heartmindandsoul.org>. Space is extremely limited, so apply today!

THE SHABBATON OF A LIFETIME!



"HMS helped me to recognize the power I held within myself to help others. I learned that people really do love me and that I have an amazing gift I can share to inspire others... I cannot thank HMS enough."

— HMS Participant



Application Form.

To apply, please fill out the following form. After your application is processed, you will receive a second form (Course Information Sheet) to complete.

Name _____ Gender: M F Grade: 10 11 12 Col. Birthdate _____ E-mail _____
Address _____ City _____ State _____ Zip _____ Home Phone _____ Cell Phone _____
Father's Name _____ Mother's Name _____ Parent contact information (in case of emergency) _____ I am a Vegetarian
Allergies and medical information: _____ Date of HM&S Event _____

ENROLLMENT AGREEMENT

I understand my deposit is non-transferable and non-refundable. The deposit for this program is \$100. I am aware that breaking this attendance commitment would greatly minimize the value I would gain both from the program and from the time period before the program, and therefore will cooperate with the Heart, Mind & Soul staff in overcoming any circumstances that would prevent me from keeping this agreement. I agree to attend, in entirety, all sessions of the program. I agree to be on time for each session. I agree to return the completed Course Information Sheet and signed copy of this Enrollment Agreement Form within 5 days.

I agree not to take any non-prescription drugs or alcohol within 24 hours of any part of the program.

As a participant in the program, I agree to respect the confidentiality of all participants and their remarks, and I agree to keep such material private and confidential.

I am aware that this program is protected by copyright and cannot be reproduced, copied, or otherwise duplicated without the express written permission of Global Relationship Centers. This agreement does not preclude me from sharing my experience on the program with anyone I choose as long as the confidentiality of the other participants is maintained and as long as the copyright is not infringed.

INFORMED CONTENT AGREEMENT

I understand that this program is educational and not psychotherapy or a substitute for psychotherapy. I have thoroughly discussed this program with a staff member or representative of Heart, Mind & Soul and I understand that, in addition to the benefit, there is always the risk of emotional and/or medical contingencies in such a group experience. I assume the risk, by this consent, of any accident or injury to myself or inflicted by me during the course, and hereby release Heart, Mind & Soul from liability.

I take full responsibility for consulting with a medical doctor prior to participating in the program concerning any known or potential physical or mental condition that I have or may have, for the purpose of getting medical permission to participate in the program. By this consent, I assume the risk of any illness during the program and hereby release Heart,

Mind & Soul from liability.

I hereby authorize the staff members of Heart, Mind & Soul to take any reasonable step on my behalf in the case of accident, injury or illness, including but not limited to emergency first aid; doctor, nurse and/or ambulance services, etc. I agree to be liable for the cost of any such action taken on my behalf, and hereby release Heart, Mind & Soul from liability. If I have had serious emotional problems or have been hospitalized for emotional problems or am currently under the care of a psychologist or psychiatrist, I understand that it is required that I attend the program only with the written permission of my therapist.

CANCELLATION – REFUND POLICY

1. If you cancel more than three weeks before the program date, your tuition less the deposit will be refunded. However, full non-refundable tuition will be required to re-enroll.

2. If you cancel your agreement less than three weeks before the program date, your entire fee will be forfeited. The only exception to this policy will be made if you are hospitalized or if you are attending the funeral of a member of your immediate family. In this case, your full tuition will be transferred to the next available program date.

3. Afterwards, if you are unsatisfied with the program, your tuition, less the deposit, will be refunded provided all of the following conditions have been met:

a. You have been in attendance the full time for each of the sessions of the program.

b. You have participated in all of the exercises of the program.

c. You have met with the Program Director.

d. You have turned in a written request for a refund, stating the reasons for your dissatisfaction, within seven days after the program.

There will be no exceptions to these policies except those stated here in writing and approved by the Director.

I agree to the terms and conditions.

Signature _____ Date _____

AGREEMENT OF PARENT/GUARDIAN

I understand that in case of accident, injury or illness, the staff members of Heart, Mind & Soul will make every effort to contact me. In case I cannot be reached, I hereby authorize the staff members of Heart, Mind & Soul to take any reasonable step on my child's behalf, including but not limited to emergency first aid; doctor, nurse and/or ambulance services, hospitalization, etc. I agree to be liable for the cost of any such action taken on my or my child's behalf, and hereby release Heart, Mind & Soul from liability. I also authorize the staff members of Heart, Mind & Soul to dispense non-prescription medication to my child if needed, including but not limited to Advil and Tylenol.

I understand that this program is educational and not psychotherapy or a substitute for psychotherapy. If my child has had serious emotional problems or has been hospitalized for emotional problems or is currently under the care of a psychologist or psychiatrist, I understand that it is required that my child attend the program only with the written permission of his/her therapist. I also take full responsibility for consulting with a medical doctor prior to my child's participation in the program concerning any known or potential physical or mental condition that he/she has or may have, for the purpose of getting medical permission for him/her to participate in the program. By this consent, I assume the risk of any illness during the program and hereby release Heart, Mind & Soul from liability. Furthermore, I have thoroughly discussed this program with a staff member or representative of Heart, Mind & Soul and I understand that, in addition to the benefit, there is always the risk of emotional and/or medical contingencies in such a group experience. I assume the risk, by this consent, of any accident or injury to my child or inflicted by my child during the course, and hereby release Heart, Mind & Soul from liability. I agree to the terms and conditions. Signature of Parent or Guardian _____ Date _____

Please enclose a check for \$379 made payable to "Heart, Mind & Soul" with your application, or provide credit card information (card number, expiration date, billing name and address, and security code) below. Note that you may secure a spot with a \$100 deposit (remainder due two weeks before the program). If you have any questions or concerns, please feel free to contact Rabbi Shimmy Trencher, MSW at 860.523.4102 or via e-mail at info@heartmindandsoul.org. Note that Heart, Mind & Soul is a project of Congressional District Programs. Donations to Heart, Mind & Soul are tax deductible under IRS code 501(c)3 and are very much appreciated. Please mail your application and payment/deposit to: Heart, Mind & Soul, 99 Brewster Road, West Hartford, CT 06117.