

State Council Retreat - October 18-20, 2019

The State Council sponsors a retreat each year in October at the [San Alfonso Retreat House](#) in [West Long Branch](#), New Jersey. It is “A Center for Christian Renewal”, conducted by the Redemptorist Fathers and Brothers. The motto for the retreat house is “**Where God and Sea Come Together.**” San Alfonso is the official retreat house for the New Jersey State Council, and has been since the 1920s!!!



The date for this year’s State Knights of Columbus Retreat is October 18-20, 2019. The State Retreat is not meant to infringe upon or disrupt any local council’s scheduled retreat; indeed, you are encouraged to have your own retreat! **Please send an e-mail or a post card with the # of knights attending your retreat and the place and date to the State Chairman.**

The State Retreat is held for those members who cannot attend their own council’s retreat, or who may wish to attend more than one or any other reasons. Retreats for your own council should be arranged early so that reservations can be made without disappointment.

Instructions and Details for the retreat are as follows:

Appoint a retreat captain for your group to coordinate this activity.

Send a Twenty-Five Dollar (\$25.00) **NON REFUNDABLE DEPOSIT for Each Person** with the registration form to the State Chairman. Make checks payable to **San Alfonso Retreat House.**

Arrival Time: **Friday 4:00pm.** Supper is served from 6:00 pm to 7:30 pm.

Departure Time: Sunday 1:00pm after Lunch.

Donation: **\$240.00/person total (less \$25.00 deposit = \$215/person payable to: San Alfonso Retreat House)**

DEADLINE for REGISTRATION: OCTOBER 8, 2019 Date of Retreat: October 18 thru 20, 2019.

***Because of the difficult financial times, the Retreat House bills have dramatically increased. They depend, more than ever, on contributions from our retreatants, Councils, Assemblies, Chapters, and Federations. Please seriously consider donating or donate more than the stated stipend.**

The 2019 Theme for the weekend will be: “**THE CALL TO HOLINESS, Journeying with Christ and others towards the fullness of life**”. This retreat will invite you to reflect on your personal call to holiness and to the fullness of life in Christ, to become "what the Father had in mind when he created you" and to bring God's love to the world.

NEW: We are also offering a SATURDAY-ONLY RETREAT (ONE-DAY, Oct 19) at a cost of \$75.00 which is NON-REFUNDABLE. Please fill out the Retreat Form, select “SATURDAY-ONLY”, and send a \$75 check.

State Council Retreat State Chairman:

John C. LeClercq, FDD
10 Sampson St, Apt. 203
Saddle Brook, NJ 07663

Phone: 201-368-8916
E-Mail: john_leclercq@hotmail.com



NEW JERSEY STATE COUNCIL RETREAT REGISTRATION FORM



Council Name: _____ Council #: _____
District #: _____ Diocese: _____ County: _____
Council Address: _____ City: _____
State: ___ Zip Code: _____ Grand Knight's Name: _____
Phone: _____ E-Mail: _____

→**SELECT:** (circle) FRIDAY/SATURDAY/SUNDAY RETREAT or SATURDAY-ONLY RETREAT

Attendee Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Special Accommodations: _____

If Possible, I Would Like To Room With: _____

1. Please include a \$25.00 deposit check with this form for the FRI/SAT/SUN Retreat (* See Below)
OR a \$75.00 full-payment check for the SATURDAY-ONLY Retreat (* See Below)
2. Make check payable to San Alfonso Retreat House. Note: All checks are non-refundable.
3. REGISTRATION FORM AND CHECK(S) Should Be Mailed Before OCTOBER 8, 2019.

Mail Completed form and check to:

John C. LeClercq, FDD
10 Sampson St, Apt. 203
Saddle Brook, NJ 07663



SPECIAL NOTE: Should an attendee require special accommodations such as a first floor room, special diet, etc., please indicate same on your registration form. We will make every effort to accommodate your request.

Remember, although this is a Knights of Columbus sponsored retreat, we will accept reservations from non-members who wish to attend. This could be a recruitment opportunity for God and the Knights of Columbus.

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Please Duplicate This Form for Each Person