Contemplative Outreach of St. Louis

7 Day Intensive / Post Intensive Retreat

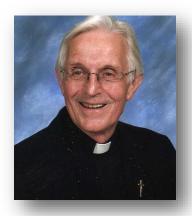
June 7 - 13, 2019

This retreat is an opportunity for practitioners of Centering Prayer to deepen their contemplative journey in the contemporary world. It is a week-long experience of integrating contemplation and action through silence, solitude and community.

The retreat offers two tracks. *The Intensive Track* is recommended for people who have completed the Introductory Workshop and who have a regular practice of Centering Prayer. Portions of Fr. Thomas Keating's *Spiritual Journey Series* will be shown for those on the Intensive Tract.

The Post-Intensive Track is for those people who have previously made an Eight-Day Intensive Retreat. The Post-Intensive offers increased silence and additional periods of Centering Prayer.

Both the Intensive and Post-Intensive Centering Prayer Retreat provide daily experiences of silence, solitude, walking, hiking, yoga, and spiritual companionship to foster an ever-deepening level of interior silence and awareness of the presence of God in everyday life.



Retreat Director Fr. Bill Sheehan, OMI has been involved with Contemplative Outreach since 1983. During that time he has led many Centering Prayer workshops and retreats in different parts of the country.

Marianist Retreat & Conference Center 4000 Highway 109, Eureka, MO 63025

Arrival: Friday, June 7th at 4:30 p.m.

Departure: Thursday, June 13th at 1:00 p.m.

Cost: \$650 includes room & board

Direct Questions to Contemplative Outreach St. Louis at 314-918-8288 (NOTE: There is NO Registration by Phone)

Registration Online at www.centeringprayerstl.org

\$150 non-refundable registration fee is due with your registration

The balance of \$500 is due on or before May 24

Partial scholarships are available

Registration by Mail

Make checks payable to: Contemplative Outreach of St. Louis
Mail form with registration fee to: Contemplative Outreach of St. Louis
C/O Grace Episcopal Church, 514 E. Argonne Drive, Kirkwood, MO 63122

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Please check boxes that apply:		Nome
☐ Intensive Retreat - I have an established Centering Prayer Practice of at least 6 months.		Name:Address:
	Post Intensive Retreat – I have previously attended an Intensive Retreat	
	Mobility Limitations - If you have any mobility limitations check this box and we'll contact you for details.	Email :
	Dietary Needs - please list	Phone: