

South Dakota Lutheran  
Via de Cristo  
TEAM Registration

WEEKENDS BEGIN THURSDAY AT 7:30 P.M. & ENDS SUNDAY  
EVENING. TEAM ARE ASKED TO ARRIVE BY 5 P.M. IF POSSIBLE

**Remember...Christ is counting on You!**

Combined Men's and Women's Weekend:  
**November 13 - 16, 2025**

**\*Beth Abraham, Rectora (605) 480-2704**

- ✓ **ALL team members** are asked to attend planning meetings: a postponement date will be TBD. Practice date is Sep 13, 2025.
- ✓ The weekend Reunion Ultreya will be held: **Saturday, Dec 6,, 2025 at 3 pm. Your attendance is strongly encouraged!**
- ✓ The cost to provide this weekend experience is \$180 per person, additional love gifts are always welcome!
- ✓ The total suggested donation is \$180, with minimum non-refundable deposit of \$50. Early bird discount is \$30 if registration is received by September 13, 2025 with deposit.
- ✓ **Due to changes in the camp registration rules, we ask all team members to register and pay by 10/10/2025.**
- ✓ All who desire to serve are encouraged to register! If unable to make the suggested donation, please know your presence is highly valued, and love gifts can help ensure your service! Let the registrar know so available love gifts may be ear marked for you!
- ✓ **You will be informed when your registration has been confirmed and be given further information at that time.**

**NEW POLICY:** All who attend the weekend must agree to abide by infection prevention protocols **that may be in place** from the State of South Dakota, Swan Lake Camp, and SDLVDC Secretariat at the time of the weekends.

**TEAM REGISTRATION** (PLEASE PRINT CLEARLY): You will receive confirmation from the team leadership when your application is received. Additional information will be provided to you prior to team weekends and the VDC weekends.

**Check one:**  Mr.  Miss  Rev.  
 Mrs.  Ms.  Dr.

**Check one:**  Married  Widowed  
 Divorced  Single

**Check one:**  Male  
 Female

Full Name \_\_\_\_\_ Age \_\_\_\_\_  
(Last) (First – As you want on name tag) (MI)

Mailing Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail address: \_\_\_\_\_

CELL ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Home ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Home Congregation \_\_\_\_\_ Denomination \_\_\_\_\_

What is your reason for wishing to serve on a Via de Cristo weekend?

Past VDC or related team experiences:

**I have health restrictions or special dietary needs (please list):**

**I give permission to post my name & home church on the SDLVDC website listing?**

Applicants Signature: \_\_\_\_\_ Date: \_\_\_\_\_

