

The Inter-Congregational Addiction Program

ICAP is a network of recovering addicted women in religious orders. It helps Roman Catholic women who are members of religious orders and are alcohol or chemically dependent, compulsive eaters, compulsive gamblers, etc. In addition to its summer retreats, ICAP networks sisters through information, referrals, assistance in meeting other members, telephone support, and email support.

2017 Schedule

Darien, IL
Carmelite Spiritual Center
July 2-8, 2017
Program begins at 4:00 PM



ICAP

*Inter-Congregational
Addiction Program*
2017

Retreats for Women Religious



“Walking and
working with Sisters
to initiate and sustain
recovery”

Visit icaptoday.org
for more information
about ICAP

For More Information contact:

Sr. Letty Close at
773-612-5207

lettyclose@comcast.net

or

Sr. Mary Gene Kinney at
mgkinn2@aol.com

or

Contact Colleen Richards at:
Telephone (800) 626-6910 ext 1207
Email: crichards@guesthouse.org

Lake Orion, MI
Guest House for Women Religious
August 6-12, 2017
Program begins at 3:30 PM



July 2-8
Darien, IL

August 6-12
Lake Orion, MI

Thank you to

GuestHouse
guesthouse.org

for their continued support of this program

The Inter-Congregational Addiction Program (ICAP)

is offering two week-long 12-Step retreats for women religious in the Summer of 2017.

These “interactive” retreats are based on the 12 Steps of Alcoholics Anonymous, and are intended for women religious who have been “working a program” of 12-Step recovery for at least six months. The purpose of the retreats is to strengthen recovery through the sharing of experience, strength and hope with other women religious in recovery. Opportunities may include the Sacrament of Reconciliation, Eucharist or non-liturgical group prayer, massage therapy by certified therapists, and walking. Retreatants have private rooms, and the meals accommodate special nutritional needs.

REGISTRATION FEE for the week-long retreat, including meals and overnight accommodations, is \$415 for the Darien, IL retreat facility and \$350 for the Lake Orion facility; scholarships are available based on request.

CANCELLATION and REFUNDS:

A refund of fees paid, less \$50, will be made if cancellation notification is received prior to start of the retreat date.



Retreat Fee & Information

Full Registrants: \$415 Darien location includes six nights room and five days board.

\$350 Lake Orion location includes six nights room and five days board.

Commuters: \$55 per day-Darien Location \$45 per day-Lake Orion Location (includes three meals)

Scholarships: Available to those sisters in need. **Please state amount needed on registration form.

Contact us: You may contact ICAP founders Sr. Letitia Close and Sr. Mary Gene Kinney by Telephone: (773) 612-5207 Email: lettyclose@comcast.net
Education & Intervention, Inc. 7777 Lake St. Suite 115 River Forest, IL 60305-1734
Make checks or money orders payable to: Education and Intervention Inc.

REGISTRATION FORM

I will attend the following retreat:

Darien, IL \$415 reg. fee
Carmelite Spiritual Center
July 2-8, 2017
Registration due by June 1
Handicap accessible rooms available

Lake Orion, MI \$350 reg. fee
Guest House for Women Religious
August 6-12, 2017
Registration due by July 15

Registration: \$ _____

I have added \$ _____ as a gift to the retreat scholarship fund.

**\$ _____ scholarship help would be appreciated.

Check enclosed for entire amount \$50.00 Deposit enclosed (balance due at time of arrival)

Please mail to the following address:

Education & Intervention, Inc. 7777 Lake St. Suite 115 River Forest, IL 60305-1734

Checks or money orders are payable to: Education and Intervention Inc.

Name: _____ Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ E-mail: _____

Name of Religious Community: _____ Initials of Community: _____

The 12-Step Program(s) I work: _____

I'll need local transportation to and/or from the retreat facility:

I will ARRIVE by (circle one) TRAIN PLANE AUTOMOBILE

on (date and time) _____ at Airport: _____

Airline & Flt. Number _____ Train/ Bus Time _____

I will DEPART on (date and time) _____ at Airport: _____

Airline & Flt. Number _____ Train/Bus Time _____