

RELEASE OF LIABILITY/PERMISSION FORM

ACTIVITY: \_\_\_\_\_ DATE: \_\_\_\_\_

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS \_\_\_\_\_

\$ \_\_\_\_\_ are enclosed to cover the cost of \_\_\_\_\_ >

We, the parents or legal guardians of \_\_\_\_\_, do hereby release from any liability, St. Gerald Church and Parish, its representatives and assignees, including but not limited to any parish staff of employees or volunteers associated with this event, from any PROPERTY DAMAGE OR PERSONAL INJURY which we or our child may suffer as a result of or in connection with our child's participation in this event. This is a full release of all claims which we may have or claim, whether those arise from strict liability or the ordinary negligence of that party or those parties released hereby.

We further agree to hold the released party or parties harmless and indemnify them from any and all liability, expenses, claims or judgement(s) which they may incur or suffer in connection with the subject matter of this release.

Signature of parent or guardian: \_\_\_\_\_

I am a representative of St. Gerald Parish and the Parish Youth Program. I will conduct myself in a manner which will reflect a positive image of myself, the Parish and the Youth Program.

Student's Signature: \_\_\_\_\_

MEDICAL MATTERS: I hereby warrant that to the best of my knowledge, my child is in good health and I assume all responsibility for the health of my child. My child has the following special needs: \_\_\_\_\_

In the event of an emergency, I hereby give my permission to transport my child to a hospital and/or to administer emergency medical or surgical treatment.

Insurance Information: \_\_\_\_\_

Signature of parent or guardian: \_\_\_\_\_

If you are unable to reach me at the above number, please call:

Photos may be taken of participants at this event for use in Youth Ministry related publications i.e. our newsletter, Spirit Link and Web page (names will be withheld on the Web page).

FORMS MAY BE RETURNED TO:

Kathy Kensinger, 7859 Lakeview St., Ralston NE 68127  
or return "Attention Youth Ministry" via the collection basket.