

# Parent/Guardian Consent Form and Liability Waiver

## Description of Activity or Event

Activity/event: \_\_\_\_\_  
Date of activity/event: \_\_\_\_\_  
Location of activity/event: \_\_\_\_\_

## Individuals in Charge:

From the parish/school: \_\_\_\_\_  
Meeting site: \_\_\_\_\_  
Mode of transportation: \_\_\_\_\_

## Estimated Time of Departure/Arrival:

Departure from parish/school/site: Date: \_\_\_\_\_ Time: \_\_\_\_\_  
Departure from activity/event site: Date: \_\_\_\_\_ Time: \_\_\_\_\_

## Participant Information

Participant's name: \_\_\_\_\_  
Birth date: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_

Parent/guardian's name(s): \_\_\_\_\_

Home address: \_\_\_\_\_

Home phone: ( ) \_\_\_\_\_

Work phone: ( ) \_\_\_\_\_

Mobile phone(s): ( ) \_\_\_\_\_

( ) \_\_\_\_\_

## Permission to Participate

I, \_\_\_\_\_ (parent or guardian's name), grant permission for my child, \_\_\_\_\_ (child's name), to participate in this event that requires transportation to a location away from the parish/school site. This activity will take place under the guidance and direction of the parish/school employees and/or volunteers from \_\_\_\_\_ (name of parish/school).

**OPTIONAL:** (Initial here: \_\_\_\_\_) **I CONSENT** for my child to be photographed or recorded on video during the course of youth ministry events and for their image to be used in either print, electronic or video form for the promotional purpose of future activities.

## Hold Harmless Agreement

As parent and/or legal guardian, I remain legally responsible for any personal actions taken by the above named minor ("participant").

I agree on behalf of myself, my child named herein, or our heirs, successors and assigns, to hold harmless and defend \_\_\_\_\_ (name of parish/school), its officers, directors, employees and agents, and the Archdiocese of New York, its employees and agents, chaperones or representatives associated with the event, from any claim arising from or in connection with my child attending the event or in connection with any illness or injury (including death) or cost of medical treatment in connection therewith, and I agree to compensate the parish, its officers, directors and agents, and the Archdiocese of New York, its employees and agents and chaperones, or representative associated with the event for reasonable attorney's fees and expenses which may incur in any action brought against them as a result of such injury or damage, unless such claim arises from the negligence of the parish/diocese.

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