

Bring original on day of event. The Adult Chaperones should keep a copy of this form for the duration of the event.

Parental/Guardian Consent Form and Liability Waiver

Description of Activity or Event: "Youth Day 2024"

Date: August 3, 2024

Location: Marycrest Convent, Monroe, NY 10950

Individuals in Charge:

From the Parish/School: _____

From the Event: *Parish Visitors of Mary Immaculate*

Mode of Transportation to/from Parish/School to Marycrest Convent Monroe, NY:

Estimated time of Departure from Parish/School: _____

Estimated time of Departure from Marycrest Convent Monroe, NY _____

Youth Participant Information

Participant's name: _____ Birth date: _____

Year of HS Graduation: _____ T-shirt size: _____ Adult Chaperone: _____

Parent/Guardian's name(s): _____

Home address: _____

Home Phone: () _____ Work Phone: () _____

Mobile Phone(s): () _____ () _____

Parent email: _____

I, _____ grant permission for my child, _____ 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 Visitors of Mary Immaculate* and parish employees and/or volunteers from _____.

Name of Parish/School/Group

_____**INITIAL HERE if you DO NOT wish for your child to be photographed or recorded on video** during the course of this event for their image to be used in either print, electronic, or video form for promoting youth ministry or the mission of the *Parish Visitors of Mary Immaculate*.

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 _____, its

Name of Parish/School/Group

officers, directors, employees and agents, and the *Parish Visitors of Mary Immaculate*, 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 *Parish Visitors of Mary Immaculate* 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/school/*Parish Visitors of Mary Immaculate*.

Signature: _____ **Date:** _____