

**2009-2010 Holy Angels Youth Ministry**  
**Master Retreat Liability Waiver and Permission Form**

**THIS FORM WILL BE RETAINED FOR ENTIRE SCHOOL YEAR**

Please notify the Youth Ministry Office of any Contact, Insurance and Medical changes

STUDENTS'S NAME: \_\_\_\_\_ Birth Date \_\_\_\_\_

PARENT/GUARDIAN'S NAME: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

HOME TELEPHONE: \_\_\_\_\_

**A) PARENT/GUARDIAN EMERGENCY CONTACT NAME AND TELEPHONE NUMBERS:**

NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

**B) IF "A" UNAVAILABLE, ALTERNATE EMERGENCY CONTACT NAME AND TELEPHONE NUMBERS:**

NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

**Nature of the Youth Ministry Events:**

Youth Ministry events for the 2009-2010 school year are sponsored by **Holy Angels Catholic Church and/or other Catholic Churches** (Sponsor). Holy Angels Catholic Church is located in the Diocese of Rockford (Diocese). By signing this waiver, you agree that you may be giving up legal rights and remedies available to yourself and your family. Read and complete this waiver carefully. If you have questions, contact an attorney.

I understand that the nature of Youth Ministry events are both social and spiritual in nature and are for high school teens. Youth Ministry events will take place at a variety of locations throughout the year, including **but not limited to** Holy Angels Catholic Church and School, St. Peter Catholic Church, Our Lady of Victory Parish, Dickson Valley Camp, Bishop Lane Retreat Center, Holy Cross Catholic Church, St. Gall Catholic Church, and St. Patrick Catholic Church.

**Nature of Risks:** I understand that voluntarily traveling to and attending the various Youth Ministry events may involve certain risks beyond the reasonable control of the SPONSOR, its staff, directors, volunteers and agents in connection with the various Youth Ministry events, et al., and the Dioceses and all parishes participating in it, and their respective officers, directors, volunteers and agents, and chaperones or representatives associated with the conference ("Diocese et al."), including but not limited to accidents, emergencies, exposure to reckless conduct of other persons, and/or negligence of and that Retreat Centers, et al., Sponsor et al., and the Diocese et al. disclaim any and all responsibility for any such risks. If at any time during the various Youth Ministry events, attendees attempt to leave the event, they do so without the permission of the Sponsor, et al and the Diocese et al, and will be subject to dismissal from participation in the event.

**Waiver of Liability/Hold Harmless:** By signing this liability waiver, I agree and acknowledge that I may be giving up important legal rights and remedies available to myself, my family, my heirs, successors, and assigns. For value received, I agree on behalf of myself, my child's other parent if known or living, my child named herein, and our heirs, successors, and assigns ("Our Behalf") that I assume all risks and waive any liability of any nature whatsoever against and agree to hold harmless Retreat Center, et al., Sponsor, et al., and the Diocese et al. with respect to any and all actions, claims or demands that may be made or brought on our Behalf against Retreat Center, et al., Sponsor, et al., and/or the Diocese et al. arising out of or in connection with my child's travel to or attendance at the camp, or any other activity my child may engage in while in transport there. Further, for value received, for any injury to third parties that may arise because of my child's actions or omissions, I agree to hold harmless and defend Retreat Center, et al., Sponsor, et al. and the Diocese et al. with respect to any and all actions, claims, expenses or demands arising there that may be made or brought against Retreat Center, et al., Sponsor, et al. and/or the Diocese et al., including but not limited to reasonable attorneys' fees and expenses arising in connection therewith.

**Media Waiver:** We consent to the use by Retreat Center, et al, and Sponsor, et al any videotape, photograph, slide, audiotape, or any other visual or audio reproduction in which my child may appear. I understand that these materials are being used for promotion of various Youth Ministry and Youth Ministry events by and for the Sponsor, et al. Such promotional activities extend to recruitment, fund-raising, advocacy, etc. I release the staff, volunteers, etc. of the Sponsor et al., and Diocese et al., from any liability connected with the use of my or my child's picture or voice recording as part of any of the above or similar activities.

**Medical Permissions (Limited):** As a condition attending the various events, I grant permission in the event of an emergency or accident for emergency medical care to be administered to my child within the Facility and/or during or after transportation to a hospital or doctor for emergency medical care. I further understand that it is not the responsibility of Sponsor, et al., Diocese et al., to attempt to reach my child's emergency contacts and that I remain responsible for my child's medical expenses.

**Medical Information**

Pertinent information about allergies or health problems, present medication and dosage which your child may be taking and any other information that will enable the adult leaders to obtain safe medical treatment for your teen, must be included on the attached Student Medication Form. **This form will be kept for entire school year. Please notify us of any changes in medication.**

**Insurance Information**

Policy in the name of: \_\_\_\_\_ Insurance Company Name/Policy Number: \_\_\_\_\_

**I fully understand the consequences of and sign this LIABILITY WAIVER AND PERMISSION knowingly, freely, and willingly. I also agree to notify the Youth Ministry Office of any contact, insurance or medical changes as they occur.**

\_\_\_\_\_



Initials of Parent/Guardian: \_\_\_\_\_

**Youth:** As a participant in Youth Ministry events, I understand and agree to conform to both the Participant Code of Conduct and Dress Code. I agree to change my clothing if it does not conform to the dress code. I also understand and agree that my parent/guardian will be notified at the time of any infractions requiring my dismissal from the retreat and that I will be sent home at my parent's/guardian's expense. Among other things, being found with any alcoholic beverages, drugs, tobacco or weapons is cause for automatic dismissal from the Youth Ministry event.

Youth Ministry Participants Initials \_\_\_\_\_