

**PARENTAL/GUARDIAN CONSENT FORM AND LIABILITY WAIVER**

**Ss. John & Paul Youth Ministry Outing – December 17<sup>th</sup> – Caroling**

Participant's Name: \_\_\_\_\_

Participant's Birth Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Grade: \_\_\_\_\_ Sex: \_\_\_\_\_

Parent/Legal Guardian's Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Alternate Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

I, \_\_\_\_\_ grant permission for my child, \_\_\_\_\_  
Parent/Guardian's name (Print) Youth's Name (Print)

to participate in this youth group event that requires transportation to a location away from the Parish site. This activity will take place under the guidance and direction of Parish employees and/or volunteers from Ss. John & Paul Catholic Church.

A brief description of the activity follows:

Type of event: \_\_\_\_\_ Caroling at Courtyard Estates in Pleasant Hill \_\_\_\_\_

Educational purpose of event: \_\_\_\_\_ Service Opportunity- Visiting the Sick \_\_\_\_\_

Destination of event: \_\_\_\_\_ Courtyard Estates - 6132 NE 12th Ave, Pleasant Hill, IA 50327 \_\_\_\_\_

Individual in charge: \_\_\_\_\_ Amanda Underhill \_\_\_\_\_

Estimated time of departure & return: \_\_\_\_\_ 6pm-7:30pm \_\_\_\_\_

Mode of transportation during event: \_\_\_\_\_ Chaperone's Cars (Contact Amanda if you can drive!) \_\_\_\_\_

Cost to be paid by the youth: \_\_\_\_\_ None \_\_\_\_\_

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

I agree on behalf of myself, my child named herein, or our heirs, successors, and assigns, to hold harmless and defend Ss. John & Paul Catholic Church, its officers, directors, employees and agents, and the Diocese of Des Moines, its employees and agents, chaperons, or representatives associated with the event, from any claim arising from or in connection with my child attending the event or in connection therewith, and I agree to compensate the parish, its officers, directors and agents, and the Diocese of Des Moines, its employees and agents and chaperones, or representatives associated with the event for reasonable attorney's fees and expenses which may occur 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: \_\_\_\_ / \_\_\_\_ / \_\_\_\_