

## ST. CHRISTOPHER CHURCH -PARENTAL CONSENT FORM

Name of Event: \_\_\_\_\_

Destination: \_\_\_\_\_

Date & Time of Departure: \_\_\_\_\_

Cost: \_\_\_\_\_

Participant Name: \_\_\_\_\_ M \_\_\_ F \_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Parents/Guardian Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

### Medical Information For Participant:

Allergies: \_\_\_\_\_

Medical: \_\_\_\_\_

### Insurance Information:

Company: \_\_\_\_\_ Group Number: \_\_\_\_\_

Contract Number: \_\_\_\_\_ Subscriber: \_\_\_\_\_

### Responsible relative/friend in the absence of parent/guardian:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Please fill out and sign the following statement of consent and release of liability. As parent/guardian, you remain fully responsible for any legal responsibility which may result from any personal actions taken by the named student. As well, your son/daughter is expected to abide by the behavior expectations as laid down by the administrators of the Youth Group. In the event that is not done a parent will be called to pick up their son/daughter at the activity site.

I give my son/daughter \_\_\_\_\_ permission to drive to and from the above event with St. Christopher's Church drivers on \_\_\_\_\_. I understand that he/she will be traveling by car. In consideration of my child being allowed to participate in this trip, I hereby agree on behalf of myself and my child, to release St. Christopher, the Archdiocese of Detroit, and any and all affiliated organizations, their employees, agents and representatives, including volunteer drivers (collectively "Releasees"), from any and all claims, including negligence, which may be asserted by me or my child, or on behalf of my child, arising from or relating to my child's participation in the field trip. In the event this release on behalf of myself and/or my child is held to be invalid or unenforceable, I hereby agree to indemnify and hold harmless Releasees from any and all claims, including negligence, which may be asserted by me or my child, or on behalf of my child, arising from or relating to my child's participation in this field trip. This release or indemnification does not apply to claims for intentional misconduct or gross negligence; nor does this release or indemnification apply to the extent of commercial insurance coverage for any claim, but this Release or Indemnification shall apply to the extent of any self-insurance or deductible applicable to any claim.

**(An additional letter of consent is required if your son/daughter will be a passenger of a teen driver. You may use the back of this form to give your permission as to who will be the responsible driver.)**

Print: Parent/Legal Guardian: \_\_\_\_\_

Signature: Parent/Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

I am able to drive for this activity: Yes \_\_\_ No \_\_\_ Name of Driver: \_\_\_\_\_ Phone: \_\_\_\_\_

Number of seat belts: \_\_\_\_\_