



Student Information

Name _____			
_____	_____	_____	_____
Preferred Name	First Name	Middle Initial	Last Name
_____	_____	_____	_____
_____	Date of Birth	_____	Grade
_____	_____	(mm/dd/yyyy)	_____
Church of Baptism	_____	City	State
_____	_____	_____	_____
Student's Phone	_____	Student's Email Address	_____
_____	_____	_____	_____
_____	(xxx)xxx-xxx	_____	_____

Name _____			
_____	_____	_____	_____
Preferred Name	First Name	Middle Initial	Last Name
_____	_____	_____	_____
_____	Date of Birth	_____	Grade
_____	_____	(mm/dd/yyyy)	_____
Church of Baptism	_____	City	State
_____	_____	_____	_____
Student's Phone	_____	Student's Email Address	_____
_____	_____	_____	_____
_____	(xxx)xxx-xxx	_____	_____

Household Information

Address _____			
_____	_____	_____	_____
_____	Street Address	_____	Apt. # or PO Box
_____	_____	Phone	_____
_____	City	State	Zip Code
_____	_____	_____	_____

Parental Information

Father's Name _____		Mother's Name _____	
_____	_____	_____	_____
_____	First	_____	Last
Phone	Email	_____	_____
_____	_____	_____	_____
_____	(xxx)xxx-xxx	_____	(xxx)xxx-xxx

Emergency Contact/Medication Information

Name _____	Phone _____
_____	_____
_____	(xxx)xxx-xxxx
Relationship to Student _____	

Medication Allergies _____	

Medication Currently Taking _____	

I/We, the parent(s)/guardian(s) of do hereby give my/our permission and approval for my/our son/daughter/guardianship to participate in all on-campus activities with the youth group.

I/ We do hereby, for myself, my heirs, executors, and administrators, waive, release, absolve, indemnify and agree to hold harmless any and all adults who chaperone this event, other participants, *Our Lady of Lourdes*, the Catholic Diocese of Orlando, and any of the above named parties' representatives, successors, supervisors, sponsors, and/or organizers, for any injuries in connection with the outing / event(s) named above, provided that said injuries are not the result of gross, willful negligence.

I/We likewise release from liability any person(s), airline, bus company, or other transportation service, transporting my child, in a privately owned and/or leased vehicle, to and from any activities connected with the above named event(s), with the exception of gross negligence due either fully, or in part, to mechanical failure and/or operator error.

I/We also give permission to seek any emergency care should my child be involved in any accident or be injured in any way during such events named above. I/We understand that in any such

instance, all attempts will be made to contact the parent/guardian. In the event that I/we cannot be contacted, I/we hereby give permission to the attending physician to hospitalize, secure treatment for, and to order injection, anesthesia, and/or surgery for my child as deemed medically necessary. Unless otherwise instructed, it is permissible that my/our son/daughter/guardianship be given aspirin / pain medication / cold medicine by either medical personnel or other adults responsible during this event.

I/we also agree that I/we am legally responsible for all/any personal actions taken by my/our child/guardianship during this event, and agree to be financially responsible for any/all damages, legal fees, and other costs incurred as a result of the actions/behavior of my child/guardianship.

Furthermore, I/we agree that if the above named student's behavior is inappropriate, unsafe and/or detrimental to the group, I/we will be contacted immediately to secure means of removing my/our child/guardianship from the event premises. I/we understand that any financial costs incurred as a result of my/our child/guardianship being sent home are my/our responsibility.

Additionally, I/we give permission for my/our son/daughter/guardianship to be photographed during activities associated with the above-mentioned event. I/we understand that said photos/videos may be used for future publicity within the parish, Diocese, and or Catholic Church.

Parent's Signature _____ Date _____

In signing the below line, I agree to abide by any / all policies and rules established for this event / activity. Should I not be able to maintain the guidelines and expectations of the adults and my peers, I understand that there will be consequences for my actions, including being removed from the activity and being sent home at my parent's expense.

Basic rules / expectations include, but are not limited to, the following: Respect for all adult leaders, peers, and all property; NO illegal drugs, alcohol, underage smoking, firearms, explosives, or other illegal substances; Males and females are to remain in separate sleeping spaces at all times; No inappropriate physical / sexual activity; Appropriate attire is to be worn at all times. Other guidelines may be set forth accordingly by adult chaperones present for the event(s).

Student's Signature _____ Date _____

Second Student Sign _____