Church of St. Raphael – Crystal, MN Archdiocesan Youth Day 2018 – Oct 27 LIABILITY WAIVER (ADULT)

Each adult participant, including group leaders and chaperons, must sign this form.

FIELD TRIP VOLUNTEER RELEASE FORM Assumption of Risk and Indemnity Agreement

Date of Event: <u>Saturday Oct. 27, 2018</u> Type of Field Trip: <u>Archdiocesan Youth Day</u> Destination: <u>Roy Wilkins Auditorium, River Center, St. Paul, MN</u> Cost: <u>No Charge</u> Individual(s) in Charge: <u>Anna Scherber</u> Time: <u>12:30-10:00 PM</u> Mode of Transportation To & From Event: <u>Bus or Carpool</u>

The undersigned person volunteers to serve as a chaperone for the above-described activity/field trip.

The undersigned, his/her personal representatives, heirs and assigns, DO HEREBY:

- 1. RELEASE, DISCHARGE AND COVENANT NOT TO SUE the Church of St. Raphael, other participating parishes, and the Archdiocese of St. Paul/Minneapolis, MN for any and all claims and liability, except for those arising out of the strict liability or negligence of releasee which causes the undersigned injury, death or property damage and further agrees to hold releasee harmless and indemnify releasee from any claim, judgment or expense releasee may incur by participation in the described activity/field trip.
- 2. UNDERSTAND that participation in the described activity/field trip involves danger and risk of injury. The inherent danger is understood and voluntarily assumed.

I HAVE READ THIS DOCUMENT. I UNDERSTAND IT IS A RELEASE OF ALL CLAIMS. I UNDERSTAND I ASSUME ALL RISK INHERENT IN THIS ACTIVITY. I VOLUNTARILY SIGN MY NAME EVIDENCING MY ACCEPTANCE OF THESE PROVISIONS.

Printed Name

Date Signed

Signature

Check the following if true: _____I have had an Archdiocesan Criminal Background Check _____I have attend the Archdiocesan Mandated VIRTUS Training _____I have signed the Archdiocesan Volunteer Code of Conduct

Please return this form to the St. Raphael Youth Ministry Office