

# ST. ROSE OF LIMA YOUTH MINISTRY PARENTAL RELEASE FORM

I request that my son/daughter \_\_\_\_\_, be allowed to participate in the St. Rose of Lima Youth Ministry events, and hereby release and indemnify St. Rose Church, the parish staff and volunteers, and the Archdiocese of Indianapolis from any and all liability from claims of any kind or nature whatsoever from my teen's participation in this event.

I understand that transportation for my son/daughter to and from this event will be provided by an adult (over age 21) licensed drivers and hereby release and indemnify St. Rose Church, the parish staff and volunteers, and the Archdiocese of Indianapolis from any and all liability from claims of any kind of nature whatsoever from my teen being transported to and from the event.

I grant the permission of First Aid to be given to my teen by the adults sponsoring this event and those transporting my teen to and from the program as their judgment deems advisable, and to make the necessary referrals to qualified physicians for treatment of illness or accidents of more serious nature. I understand I will be promptly notified in the event of any serious illness or accident.

Participant's Signature \_\_\_\_\_

Parent Name \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent e-mail \_\_\_\_\_

Parent Cell and/or Emergency Phone Numbers:  
\_\_\_\_\_

Participant's School: \_\_\_\_\_ Grade \_\_\_\_\_

Participant's Email \_\_\_\_\_ Participant's Birthday \_\_\_\_\_