

Parish Name:

Off-Site Release and Permission Form – for Minors

Event/Activity Details		
Event Name:		
Date/Times:		
Location:		
Mode of Transportation to/from Event:		
Participant Information		*denotes required information
Participant Name*:		
Date of Birth* ____/____/_____	Grade:	Gender*: Male or Female
Primary Household Phone*:	Participant Cell^:	
Home Address*:		
City*:	State*:	Zip*:
T-Shirt Size (circle one) S M L XL 2XL 3XL		
Participant Email^:		
Parent/Guardian/Additional Emergency Contact Information (See Contact Note)		
Parent/Guardian 1 Name*:		
P/G 1 Cell:	P/G 1 Email:	
Parent/Guardian 2 Name:		
P/G 2 Cell:	P/G 2 Email:	
Additional Emergency Contact Name:		
EC Phone:	EC's relationship to Participant:	
Medical, Medication, & Allergy Information		
Dietary Restrictions and Food Allergies: (Describe restrictions and food allergy, reactions, severity, & management)		
Medical Condition & Medication Allergies Notes: (List relevant medical conditions, medication allergies, physical restrictions, recent surgeries, learning challenges, behavioral conditions, or social concerns (depression, anxiety, etc) the event organizer should be aware of)		
List Any Current Prescription Medications: (See Medication Notes: Medication list and instructions to be updated at event sign-in)		
Over-the-Counter (OTC) Medication Restrictions (List OTC's meds your child MAY NOT receive): I GRANT permission for these Over-the-Counter (OTC) medication to be given to my child: Non-aspirin/pain reliever, Throat Lozenge, Decongestant, Antacid, Antihistamine, and Diarrheal, EXCEPT the restrictions I list here: (Write NO OTC Meds to be given, if you do not want any OTC meds provided):		
Insurance Information (Optional: Attach a copy of insurance card)		
Insurance Carrier:	Policy #:	ID#:
Parental/Guardian Signature/ Consent: <i>I have read the consent to participate & liability release, consent to treat, media release, and code of conduct, and I understand and voluntarily agree to their provisions.</i>		
Parent/Guardian Name*: [PRINT] _____		
X [SIGNATURE]_____	Date: ____/____/_____	

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^CONTACT NOTE: The contact information listed on this registration may be used for communication with parent/guardians and/or participants regarding this event. Parents will be copied on any communications directly to minors.

MEDICATIONS NOTE: All minor participants at this event are required to turn all prescription and non-prescription medication(s) over to a supervising adult designated to keep medication(s). The participants will bring their own prescription medications needed during this event and such medications will be clearly labeled. It is the participant's responsibility to present himself/herself at a location designated to receive medication(s) at the frequencies/times described when turning in the medications. It is to be understood that the adult to whom the participant surrenders the medication to has no medical training and this adult will not measure dosages. The participant will return the medication(s) to the adult after he/she self-medicates. At the conclusion of the event it will be this child's responsibility to pick up any remaining medication(s). **NOTE:** Should your child have an Emergency Injection Device (Epi-Pen), Diabetic Condition, Asthmatics with a rescue inhaler, or other special medical condition, it is important to provide a clear description as to the nature of the medical condition and any medication. This is important for situations where the participant becomes unable to self-administer these treatments and to communicate with Emergency Response Personnel. If a child, who is normally able to self-administer these medications becomes unable to self-administer or is in distress, ministry leaders, volunteers, or other parish personnel will immediately call 911 to summon Emergency Medical Personnel to respond to the medical emergency. Ministry Leaders, volunteers, and other parish personnel are NOT trained to administer these types of emergency medications.

CONSENT TO PARTICIPATE AND LIABILITY RELEASE: In consideration for allowing registering Participant to participate in this activity, I / We, the parent(s)/guardian(s)/conservator(s) of the Participant grant permission for my/our son/daughter to travel to and participate in the Event described in this form. I/we assume all risks and hazards incidental to the participation in the Event, including transportation to and from the Event. In consideration for allowing this minor to participate in the event listed above, and on behalf of myself/ourselves and Participant's parents, legal guardians, siblings, heirs, assigns, and personal representatives, I/we hereby release and agree to fully and unconditionally protect, indemnify, and defend the Parish(es)/School(s) hosting this Event, the Roman Catholic Diocese of Dallas, and their respective officers, agents, and employees, (collectively, "Indemnitees") and hold each Indemnitee harmless from and against any and all costs, expenses, attorney's fees, claims damages, demands, suits, judgments, losses, or liability for injuries to property, injuries to persons (including Participant) and from any other costs, expenses, attorney fees, claims, suits judgments, losses, or liabilities of any and every nature whatsoever arising in any manner, directly or indirectly, out of, in connection with, in the course of, or incidental to the minors participation in the Event, REGARDLESS OF CAUSE OR OF THE JOINT, COMPARATIVE OR CONCURRENT NEGLIGENCE OF THE INDEMNITEES. In the event any legal action is taken by either party against the other party to enforce any of the terms and conditions of this release, it is agreed that the unsuccessful party to such action shall pay to the prevailing party therein all reasonable court costs, attorneys' fees, and expenses incurred by the prevailing party.

AUTHORIZATION OF CONSENT TO TREAT MINOR: I / We, the parent(s)/guardian(s)/conservator(s) of the minor(s) being registered do hereby authorize the parish(es) &/or diocese leading the Event described in this registration, its ministry leaders, event organizers, employees, contractors and volunteers as agent(s) for the undersigned to consent to any x-ray examination, anesthetic, medical, dental, or surgical diagnosis or treatment, and hospital care which is deemed advisable by, and is to be rendered under the general or specific supervision of any physician or surgeon licensed under the laws of the jurisdiction where such diagnosis or treatment may be given, whether such diagnosis or treatment is rendered at the office of said physician, at a hospital, or at any other location. It is understood that this authorization is given in advance of any specific treatment or diagnosis, but is given to provide authority and power of treatment, or hospital care which the aforementioned physician in the exercise of best judgment may deem advisable. This authorization is given pursuant to the provisions of Chapter 32 of the Texas Family Code. This authorization shall remain effective throughout the specific event dates listed above. In consideration of acceptance of this authorization, but without any time limitation and without any future right of revocation, I hereby release, defend and hold harmless the Parish(es)/School(s) hosting this event, and the Roman Catholic Diocese of Dallas (Diocese), their officers, directors, agents, employees, volunteers, ministry leaders, event organizers, and contractors from all claims, liabilities and loss in any way arising out of or in connection with or relating to such treatment and treatment decisions.

MEDIA RELEASE: On occasion, video recordings, audio recordings, photographic slides, and photographs are taken of minors during church and diocesan sponsored activities. These are utilized in newsletters, websites, event promotion, advertisements and other printed media. For good and valuable consideration, I hereby grant to the parish(es) &/or diocese leading the registering Event the irrevocable and unrestricted right to make, use and/or publish any and all photographs, videos, and other images of me/my minor child(ren) listed on this registration form, or images in which me/my minor child may be included, now existing or hereafter made, in any case, with or without identifying subject for editorial, advertising, news, or any other purpose and in any manner and medium; to alter the same without restriction; and to copyright the same. I hereby release and agree to fully and unconditionally protect, indemnify, and defend any parish(es) described on this registration form), the Roman Catholic Diocese of Dallas, and their respective officers, agents, and employees, (collectively, "Indemnitees") and hold each Indemnitee harmless from and against any and all costs, expenses, attorney's fees, claims damages, demands, suits, judgments, losses, or liability for injuries to property, injuries to persons (including the participating minor) and from any other costs, expenses, attorney fees, claims, suits judgments, losses, or liabilities of any and every nature whatsoever arising in any manner, directly or indirectly, out of, in connection with, in the course of, or incidental to the use or publication of any photographs, videos, or other images of my child, REGARDLESS OF CAUSE OR OF THE JOINT, COMPARATIVE, OR CONCURRENT NEGLIGENCE OF THE INDEMNITEES.

CODE OF CONDUCT: 1. Every minor and adult will treat each other with respect, and conduct themselves in a manner that positively represents our community. Respect includes verbal exchanges, physical and psychological exchanges as well. Inappropriate displays of affection as well as any abuse of another person will not be tolerated. 2. Participants must attend all event activities. If provided, name badges must be worn at all times during the event. 3. Any drug, alcohol, tobacco, vaping, or illegal substance abuse will not be tolerated and will result in removal from the event, a possible ineligibility to participate in other ministry events, or may even include legal ramifications. Adults and minors will abide by all laws (vandalizing property damage, weapons, stealing, etc.) and will be held responsible for breaking these laws and for any damages. No weapon of any kind may be possessed by participants. 4. Adult leaders and chaperones have been given the authority to maintain safety and adherence to this Code of Conduct. Please give them your respect and cooperation. 5. Parents have the duty to review this code of conduct with their child. Parents agree that their child shall abide by regulations outlined in this Code and at the event. If their child fails to abide by the Code that child may be immediately dismissed from the event and sent home immediately at the parent's expense, with no right of reimbursement for any amount in connection therewith.

MODIFICATIONS OR OPTING OUT: To discuss modification of any of these consents please contact the ministry/event coordinator.