

St. Margaret Mary Parish
111 S. Hubbard St. Algonquin, IL 60102
847-658-7881
Youth Ministry Liability Release Form

Participant's Name: _____
Birth Date: _____ **Grade:** _____

I grant permission for the administration of First Aid to my youth by the people in charge of the event, and those transporting my child to and from the event as their judgment deems advisable, and to make the necessary referrals to qualified physicians for the treatment of illness or accidents of a more serious nature. I understand I will be promptly notified in the event of any serious illness or accident and prior to any major surgery, except when delay in such communication would endanger life. In the case of a medical emergency, I understand that every effort will be made to contact the parent/guardian of the participant. In the event that I cannot be reached, I hereby give permission to the physicians selected by the adult staff to hospitalize, secure proper treatment for and to order injection, anesthesia, or surgery deemed necessary for my child.

Allergic to medication/other? NO YES (circle one)

Medication(s) presently taking:

Insurance Information

Policy in the name of:

Policy Number:

Identification /Social Security Number:

Authorized Physician:

Phone Number:

Parent/Guardian Signature:

Date: _____

Address:

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone _____
Wireless Phone: _____ Other: _____

In case of emergency, contact: _____

Phone #: _____

TOTAL COST :235.00
DEPOSIT: \$50.00 (non-refundable)
AMT. Paid: _____ CHECK # _____ CASH
AMT Due _____ by March 1, 2010
T-Shirt Size (adult) S M L XL

I, _____ (Parent Name), give permission for my son/daughter to attend **Camp WOW 2010 June 21 – 24, 2010 at Dickson Valley Camp in Newark, IL**

I hereby release and indemnify my parish, St. Margaret Mary in Algonquin, IL its staff, volunteers and the Diocese of Rockford from any and all liability arising from claims of any kind or nature whatsoever from my child's participation in this event.

Videotaping and Still Photographs

Video and still photographs may be taken during this event. This authorization form constitutes permission for my youth's participation in the videotape and or still photographs, which may be used for future promotional efforts, including the Diocese of Rockford website and St. Margaret Mary website.

Code of Behavior

As a participant in this event, he or she is representing our parish during this event and we expect he/she will represent us well. We expect that he/she will display mature and responsible behavior, which for many years has been the trademark of Catholic youth and adults of our diocese.

Some expectations:

1. All participants are expected to arrive on time.
2. All participants are expected to demonstrate common courtesy and respect at all times. Inappropriate language/behavior will not be tolerated.
3. Socializing should always be done in public.
4. Dress should reflect the value of modesty. Writing on clothing should reflect Christian values.
5. The possession or consumption of any alcoholic beverage and/or possession/use of any illegal drug is not permitted.
6. Smoking is not permitted.
7. Weapons and/or drug paraphernalia are not allowed.
8. If under the age of 18, prescription drugs need to be given to an adult for storage and distribution.
9. Infraction of these rules can mean immediate dismissal with no refund. Participants will be responsible to local authorities as well.

I understand and agree to this Code of Behavior. I also understand and agree that at the time of an infraction requiring dismissal, I am responsible for my removal for the premises and any costs involved.

If under the age of 18, I also understand and agree that my parents or guardian will be notified at the time of an infraction requiring my dismissal. My parents or guardian will be responsible for my removal from the premises and any costs involved.

Youth Signature: _____

Parent/Guardian Signature: _____

Date: _____