

## YOUTH ACTIVITY PERMISSION SLIP

To be kept on file for the current academic year, and renewed annually.

A brief description of the activity follows:

Event                      Sunday Youth Night  
Location                  Saint Joseph Church and Gym  
Date                        School Year 2016-2017

Participant's name: \_\_\_\_\_ Participant's Cell : \_\_\_\_\_

Birth date: \_\_\_\_\_ Sex: \_\_\_\_\_ Participant's Email: \_\_\_\_\_

**Parent/Guardian's name:** \_\_\_\_\_

**Parent's Email:** \_\_\_\_\_

Home address: \_\_\_\_\_

Home phone : \_\_\_\_\_ Cell phone: \_\_\_\_\_

I grant permission for my child to participate in this parish event. This activity will take place under the guidance and direction of parish employees and/or volunteers from Saint Joseph Youth Ministry.

As parent and/or legal guardian, I remain legally responsible for any personal actions taken by the above named minor ("participant"). I agree on behalf of myself, my child named herein, or our heirs, successors, and assigns, to hold harmless and defend Saint Joseph Church, its officers, directors, employees and agents, and the Archdiocese of New York, its employees and agents, chaperons, or representatives associated with the event, from any claim arising from or in connection with my child attending the event or in connection with any illness or injury (including death) or cost of medical treatment in connection therewith, and I agree to compensate the parish, its officers, directors and agents, and the Archdiocese of New York, its employees and agents and chaperons, or representative associated with the event for reasonable attorney's fees and expenses which may incur in any action brought against them as a result of such injury or damage, unless such claim arises from the negligence of the parish/diocese.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Further, I agree that my child's picture may be used to promote youth ministry events through flyers, brochures and on our website. **Initial here:** \_\_\_\_\_