

# PARENTAL/GUARDIAN CONSENT FORM AND LIABILITY WAIVER

Dear Parent or Legal Guardian:

If you would like your child to participate in this event that requires transportation to a location away from the parish, school or archdiocesan office site, please complete, sign, and return this statement of consent and release of liability. As parent or legal guardian, you remain legally responsible for any personal actions taken by the named minor ("participant").

This activity will take place under the guidance and supervision of employees and/or volunteers from  
CHRIST THE KING CATHOLIC CHURCH. A brief description of the activity follows:

**Type of event: Night out at OWA**

**Destination: OWA**

**Individual in charge: Casey Tomberlin**

**Date and estimated time of departure and return: Wed. July 7, 4pm-9pm**

**Mode of transportation to and from event: school bus – drop off and pick up at the Alley**

Participant's name: \_\_\_\_\_ Birth date: \_\_\_\_\_

Participant Cell Number: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Parent/Guardian name: (please print) \_\_\_\_\_

Address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_

Parent Email: \_\_\_\_\_

*If needed, can you drive for this event? Y N If needed, can you chaperone for this event? Y N*

*How many seats do you have? \_\_\_\_\_ plus driver*

### **Student Agreement/Code of Conduct:**

While participating in this field trip, I will accept responsibility for maintaining good conduct and appearance. I will listen attentively, follow directions and be respectful to everyone. I understand and accept that all school and parish rules and disciplinary actions apply to this trip. My parent(s)/guardian(s) and I have discussed this code of conduct for the field trip.

Participant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I agree on behalf of myself, my child named herein, or our heirs, successors, and assigns, to hold harmless and defend (name of parish/school/institution) **CHRIST THE KING PARISH** its officers, directors, employees and agents, and the Archdiocese of Mobile, its employees and agents, chaperones, 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/school/institution, its officers, directors and agents, and the Archdiocese of Mobile, its employees and agents and chaperones, or representative associated with the event for reasonable attorney's fees and expenses that 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/school/institution/archdiocese.

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

**ARCHDIOCESE OF MOBILE  
PARENTAL/GUARDIAN COVID-19  
CONSENT FORM AND LIABILITY WAIVER**

---

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

Birth date: \_\_\_\_\_ Sex: \_\_\_\_\_

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

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

Home phone : \_\_\_\_\_ Business phone: \_\_\_\_\_

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and as a result, social distancing is recommended. **Christ the King Catholic Parish/School** will follow state and local standards of conduct and has put in place reasonable preventative measures to reduce the spread of COVID-19 at its **Christ the King Catholic Parish/School** activity (including but not limited to summer camp). However, even though such standards will be followed and reasonable measures put into place, **Christ the King Catholic Parish/School** cannot guarantee that you or your child(ren) will not become infected with COVID-19. Further, attending the **Christ the King Catholic Parish/School** activity could increase your risk and your child(ren)'s risk of contracting COVID-19.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and that my child(ren) and I may be exposed to or infected by COVID-19 by participating in the **Christ the King Catholic Parish/School** activity and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at **Christ the King Catholic Parish/School** may result from the actions, omissions, or negligence of myself and others, including, but not limited to, **Christ the King Catholic Parish/School** employees, volunteers, and program participants and their families.

Considering the foregoing, however, I, \_\_\_\_\_, grant permission for my child, \_\_\_\_\_, to participate in this parish activity that may require transportation to a location away from the parish site, notwithstanding the risks associated with the COVID-19 virus and group activities.

I confirm that there are no necessary changes to the Medical Information Consent form for my child that I previously submitted. If there are any necessary changes, I will complete another Medical Information Consent form.

I further agree on behalf of myself, my child named herein, and my spouse, our heirs, successors, and assigns, to release, indemnify, and hold harmless **Christ the King Catholic Parish/School** and The Roman Catholic Church of the Archdiocese of Mobile, their members, directors, officers, employees, agents and representatives ("Indemnitees") associated with the event arising from or in connection with the negligent acts or omissions of the Indemnitees ONLY in regard to prevention of the spread of the COVID-19 virus. I SPECIFICALLY ACKNOWLEDGE AND AGREE TO THE FOREGOING.

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