

HIGH SCHOOL ATTENDEE/INDIVIDUAL REGISTRATION FORM

DESTINATION JESUS XXV - Feb. 14-16, 2020

(Due: January 17, 2020)

Each High School Attendee must submit this form to the group's Youth Minister. The "Liability & Medical Information/Release" portion MUST be signed by a parent/legal guardian. Please do not use any other liability or registration form.

NAME _____ MALE _____ FEMALE _____

AGE _____ HIGH SCHOOL GRADE _____ School Attending _____

HOME ADDRESS _____ CITY _____ ST _____ ZIP _____

PARENT CELL # _____ PARENT EMAIL _____

EMERGENCY # _____ ADULT T-SHIRT: S M L XL 2XL 3XL

PARISH _____ PARISH YOUTH MINISTER NAME _____

LIABILITY & MEDICAL INFORMATION/RELEASE

Accident/Hospitalization Policy Name _____ Policy Number _____

Current Allergies _____

Medical Conditions _____

Current Medications _____

Permission to give over-the-counter medication? YES _____ NO _____

The undersigned hereby releases, forever discharges, and agrees to hold harmless Our Lady of Mt. Carmel Church & The Diocese of Lafayette-in-Indiana, Inc. from and against any and all liability, claims, demands, lawsuits and expenses of any kind arising from personal injury, sickness, death, or property damage of any kind whatsoever which may be incurred or suffered by the undersigned and/or participant.

The undersigned further agree to indemnify and hold harmless Our Lady of Mt. Carmel Church & The Diocese of Lafayette-in-Indiana, Inc. and its respective members, directors, employees and agents (collectively, the "Indemnities") from and against any and all claims, demands, actions, lawsuits, and liabilities, including attorney fees and expenses sustained by the Indemnities as the result of negligent, willful or intentional acts of the undersigned and/or participant.

The undersigned and participant agrees not to transmit, distribute, or sell (or aid in transmitting, distributing, or selling) any description, account, pictures, videos, audios or other forms of reproduction of this event (in whole or in part).

We believe that both the youth and the parish benefit from positive recognition. There may for media coverage to celebrate your teen throughout the weekend. We ask permission to release this type of communication to our diocesan paper, *The Catholic Moment* and our parish family communications (ie: bulletin and OLMC website)

YES, OLMC & Diocese of Lafayette-in-Indiana have my permission to release DJ communication involving my youth as stated

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NO, OLMC & Diocese of Lafayette-in-Indiana do not have my permission to release DJ communication involving my youth as stated above.

If the participant is under 18 years of age: I (We) the parents or legal guardian of the participant, do hereby grant permission for our child to participate fully in the Destination Jesus Retreat and all of its activities and hereby give permission for my son/daughter, in case of an emergency, to be taken to a physician or hospital by Destination Jesus personnel. I (We) hereby assume all responsibility for all medical bills. Further, should it be necessary for the participant to return home due to medical reasons, disciplinary action or otherwise, I (we) assume all responsibility and transportation costs.

Parent or Legal Guardian Signature (**Required**) _____ Date _____

Parent or Legal Guardian Printed Name (**Required**) _____ Date _____

Participant's Signature (**Required only if 18 yrs. or older**) _____ Date _____

Revised 11/26/2019