

PARENT PERMISSION FORM FOR TRIVIA NIGHT

Dear Parent or Legal Guardian:

Your son/daughter is eligible to participate in a parish-sponsored activity. This activity will take place under the guidance and supervision of volunteers from St. Mary Parish.

Name of Event: Teen Trivia Night

Destination: Fr. Bart Hall @ St. Mary 929 Charlotte Ave Kalamazoo MI 49048-1809

Designated Supervisor of Activity: Colleen McInnis (248) 921-6137

Date and Time: Sunday, Feb. 9, 6:00pm to 9:30pm

Cost: \$5 per player (Concessions are additional and will be available for purchase)

If you would like your child to participate in this event, please complete, sign, and return the following statement of consent and release of liability. As parent or legal guardian, you remain fully responsible for the actions and conduct of your child.

*****STATEMENT OF CONSENT*****

I hereby consent to participation by my child(ren), _____, in the event described above. I understand that this event will take place at St Mary and that my child(ren) will be under the supervision of the parent volunteers on the stated date. I further consent to the conditions stated above on participation in this event.

In consideration of my child(ren) being allowed to participate in this youth event, I hereby agree on behalf of myself and my child(ren), to release St. Mary Parish, the Roman Catholic Diocese of Kalamazoo, and any and all affiliated organizations, their employees, agents and representatives, including volunteers (collectively "Releasees"), from any and all claims, including negligence, which may be asserted by me or my child, or on behalf of my child, arising from or relating to my child(ren)'s participation in the event. In the event this release on behalf of myself and/or my child(ren) is held to be invalid or unenforceable, I hereby agree to indemnify and hold harmless Releasees from any and all claims, including negligence, which may be asserted by me or my child(ren), or on behalf of my child(ren), arising from or relating to my child(ren)'s participation in this event. This release or indemnification does not apply to claims for intentional misconduct or gross negligence; nor does this release or indemnification apply to the extent of commercial insurance coverage for any claim, but this Release or Indemnification shall apply to the extent of any self-insurance or deductible applicable to any claim.

With my signature I hereby grant permission to the Diocese of Kalamazoo to publish my child(ren)'s name, photo or video image in connection with a feature story, or other publication as deemed appropriate by the Diocese.

(Print Parent's/Legal Guardian's Name)

(_____)_____
Emergency Contact Number during the event

(Parent's/Legal Guardian's Signature)

(Date)

Please bring this signed form to the event.