

# **ADULT REGISTRATION FORM FOR PARISH ONE DAY TRIP**

To participate in the  
St. Ann, St. Ignatius, St. Thomas the Apostle, St. Hugh & Our Lady of Consolation Parishes'

## **Trip to March for Life in Washington, D.C. on Friday, January 18<sup>th</sup>, 2019**

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NAME

PHONE NO.

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ADDRESS

CITY

STATE

ZIP

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EMAIL

PARISH REGISTERED AT

### **INDEMNIFICATION**

I agree that in case of injury to myself, I will apply my hospitalization and/or accident insurance toward payment of the expenses incurred and will not look to *St. Ann, St. Ignatius, St. Thomas the Apostle, St. Hugh and/or Our Lady of Consolation Parishes* or the Roman Catholic Diocese of Pittsburgh for the payment of any medical costs or injury related costs.

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**Signature**

**Date**

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Name and Phone Number of Emergency Contact Person