

Parental Consent for Youth to Participate in Activity

- A. The undersigned represent that they are the parents or legal guardians of *Participant* and have full authority under law to sign this document.
- B. Parents grant their permission for *Participant* to enroll and participate in the Faith Formation at *St. Anthony Marie de Claret Catholic Church* for the 2021-2022 faith formation year.
- C. Parents acknowledge and agree that:
- (1) *Participant* and Parents voluntarily seek to participate in Faith Formation;
 - (2) Faith Formation may involve physical activity that involves risk of injury;
 - (3) *Participant* and Parents will abide by all policies and rules established for Faith Formation and instructions of those persons facilitating, organizing, or overseeing the Faith Formation;
 - (4) Parents and *Participant* are responsible for *Participant's* conduct during the school year and are responsible for any damages, claims, or other costs caused by *Participant* or incurred as a result of *Participant's* conduct; and
 - (5) if *Participant's* conduct is inappropriate, unsafe or detrimental to the environment, other participants or other persons, *St. Anthony Marie de Claret* may suspend or expel *Participant* from Faith Formation and future events.
- D. Unless this paragraph is struck and initialed by the undersigned, Parents authorize *St. Anthony Marie de Claret*, to provide over-the-counter aspirin, pain relievers, cold medicine, and other over-the-counter medication to *Participant* at *Participant's* request if *St. Anthony Marie de Claret* deems it reasonable to do so. *St. Anthony Marie de Claret* will make reasonable attempts to notify Parents prior to authorizing any such over-the-counter medication.
- E. In the event of an emergency or a situation that is reasonably considered to be an emergency, Parents authorize *St. Anthony Marie de Claret* to seek and authorize emergency medical care to be given to *Participant* (for example, first aid, medication, anesthesia, or surgery). *St. Anthony Marie de Claret* will make reasonable attempts to notify Parents prior to authorizing any such emergency care.
- F. Parents grant *St. Anthony Marie de Claret* and the *Diocese of Austin* permission:
- (1) to photograph and video tape *Participant* during the school year; and
 - (2) to use the photographs and video tapes in publications and promotions of *St. Anthony Marie de Claret*, including but not limited to publications such as websites, newsletters, advertisements, scrapbooks, and yearbooks
- G. To the extent permitted by law, Parents, for themselves and for the *Participant*, release and agree to indemnify and hold harmless the Parish and the Diocese from any liability, claims, demands, and costs which may arise as a result to such participation in Faith Formation or which is, in any way, related to such participation. This paragraph covers loss under any theory of loss (negligence or otherwise) including but not limited to personal injury or property damage. Parents and *Participant* assume all risk of injury or loss to themselves or their property.**

Child's Name _____

Parent/Guardian Name (Print) _____ Signature: _____

Date: _____