

NFCYM/NCYC LEGAL AGREEMENT**ADULT PARTICIPANT****GENERAL RELEASE, COVENANT NOT TO SUE, LIABILITY WAIVER, AND PERMISSION AGREEMENT****(Arch)Diocese of _____****Parish/School _____**

Instructions: No adult will be permitted to attend National Catholic Youth Conference ("NCYC") sponsored by National Federation for Catholic Youth Ministry, Inc. ("NFCYM") until s/he executes this Legal Agreement. **By signing this Legal Agreement, you freely and voluntarily agree you are giving up legal rights and remedies available to yourself and your family. Read and complete this Legal Agreement carefully. If you have questions, contact an attorney. No changes can or will be made to this document.** Because it contains emergency contact information, **IT IS ADVISABLE TO KEEP A COPY OF THIS SIGNED LEGAL AGREEMENT IN YOUR NAME BADGE AT ALL TIMES DURING NCYC.**

Name: _____

Complete Home Address: _____

Home Telephone: _____ Date of Birth: _____

A) Emergency Contact Name and Telephone Numbers:

Name: _____ Relationship: _____

Cell Ph: _____ Work Ph: _____ Home Ph: _____

B) If "A" Unavailable, Alternate Emergency Contact Name and Telephone Numbers:

Name: _____ Relationship: _____

Cell Ph: _____ Work Ph: _____ Home Ph: _____

Nature of NCYC Event: I understand the nature of this private NCYC event sponsored by NFCYM and its member Roman Catholic Dioceses is: it will be held at the Indiana Convention Center and Lucas Oil Stadium ("Facilities"), Indianapolis, Indiana, from November 21-23, 2019, some 23,000 youth and adults will attend over three days, and as a condition of using Facilities, Facilities require NFCYM to retain security and medical personnel whose actions are beyond NFCYM's control. NCYC will be in session from noon-10:30 PM on day one and 7:30 AM-10:30 PM on days two and three, excluding breaks for meals and/or recreational activities.

Nature of Risks: I understand: a) voluntarily traveling to and attending an event of this nature may involve certain risks beyond the reasonable control of NFCYM, its officers, directors, volunteers, and agents in connection with NCYC ("NFCYM et al.") and Diocese and all parishes within it, and their respective officers, directors, volunteers, and agents, or representatives associated with NCYC ("Diocese et al."), including but not limited to accidents, emergencies, exposure to reckless conduct of other persons, and/or negligence of security and medical personnel, and b) NFCYM et al. and Diocese et al. disclaim any and all responsibility for any such risks. I understand I will sometimes be at Facilities and at other times at other places such as hotels, restaurants, or on excursions in or about Indianapolis. During any break in NCYC, there will be opportunities to participate in recreational or other activities away from Facilities. Whether at Facilities or away, I participate at my own risk and subject to all terms and conditions of this Legal Agreement, and/or set by any recreational or other provider.

General Release & Waiver of Liability/Covenant Not to Sue & Hold Harmless: By signing this Agreement, I agree and acknowledge I am giving up important legal rights and remedies available to myself, my family, my heirs, successors, and assigns. This is a "**General Release**" which means I am giving up and releasing important legal rights described below, and it is to be construed in the broadest possible manner.

For value received, I agree on behalf of myself, my heirs, successors, and assigns ("Our Behalf") I assume all risks and generally release and waive any liability of any nature whatsoever against, and agree to hold harmless, NFCYM et al. and the Diocese et al. with respect to any and all actions, claims, or demands that may be made or brought on Our Behalf against NFCYM et al. and/or the Diocese et al. arising out of or in connection with travel to or attendance at NCYC, or any other activity I may engage in while in the Indianapolis area. In addition, and not by way of limitation, I further agree to abide by any terms and conditions imposed by name badges or credentials, e.g., permission to photograph and record.

A "**Covenant Not to Sue**" is a legal term that means a person promises not to file a lawsuit. It is different from the General Release of claims above. Besides waiving and releasing the claims covered above, I covenant on Our Behalf not to sue and promise never to file or prosecute any legal claim of any kind against NFCYM et al. and Diocese et al. in any federal, state,

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or municipal court, asserting any claims that are released by this Agreement. I am also waiving on Our Behalf any right to monetary recovery.

Further, for value received, for any injury to third parties that may arise because of my own actions or omissions, I agree on Our Behalf to hold harmless and indemnify and defend NFCYM et al. and Diocese et al. with respect to any and all actions, claims, expenses, or demands arising therefrom that may be made or brought against NFCYM et al. and/or Diocese et al., including but not limited to reasonable attorneys' fees and expenses arising in connection therewith.

Any disputes under this Legal Agreement will be governed by Indiana law without regard to conflicts, and the venue will be in Indianapolis, Indiana. I agree to resolve by mediation prior to filing any court action.

Medical Permissions (Limited): As a condition of attending NCYC at Facilities, in the event of an emergency or accident rendering me unconscious, I grant permission for emergency medical care to be administered to me within Facilities and/or during or after transportation to a hospital or doctor for emergency medical care. I understand in Indiana a person may claim Good Samaritan defenses for providing in good faith gratuitous emergency care at the scene of any emergency or accident. I further understand a) it is not the responsibility of NFCYM et al. or Diocese et al. to attempt to reach my emergency contacts, and b) I remain responsible for my own medical expenses.

NFCYM Code and Guidelines for Adult Participants: At all times my actions as a chaperone shall remain subject to the supervision and control of my Diocese. I agree to abide by the *NFCYM Adult Participant Code of Conduct* ("Code")(nfcym.org/youthprotection) and *Behavior Guidelines for the NCYC* ("Guidelines")(nfcym.org/ncycbehavior). I understand it is my legal duty to review Code and Guidelines prior to signing this Legal Agreement, and if I fail to abide in any way by Code or Guidelines, I may be dismissed from NCYC with no right of reimbursement or refund for any amount in connection therewith from NFCYM et al. or Diocese et al.

NCYC Fee Nonrefundable: I agree if I suffer an illness requiring dismissal from NCYC, there is accident or emergency requiring dismissal of myself from NCYC, if I violate Code, or if NCYC must be discontinued in event of accident or emergency, I must return home at my expense, and I assume the risk of any loss of any nonrefundable or additional costs associated with travel and fees for NCYC, with no right of reimbursement or refund for any amount in connection with therewith from NFCYM et al. or the Diocese et al.

Insurance: NFCYM urges you to purchase travel or other insurance to cover the risks you have assumed under this Legal Agreement. Please indicate below:

- YES**, I have purchased a travel or other insurance package to manage any risks I may experience by attending NCYC.
- NO**, I knowingly decline to purchase an insurance package and acknowledge that I declined this risk management opportunity.

I fully understand the consequences of and sign this LEGAL AGREEMENT - GENERAL RELEASE, COVENANT NOT TO SUE, LIABILITY WAIVER, AND PERMISSION AGREEMENT knowingly, freely, and willingly. If any provisions of this Agreement shall be held to be invalid or unenforceable for any reason, the remaining provisions shall continue to be valid and enforceable. I understand this Legal Agreement must be printed then signed by hand. Failure to notarize does not diminish legal validity of this Legal Agreement. A typed name does not constitute a signature.

Signature of Adult Participant _____ Date _____

NOTARY (Mandatory only if Required by Diocesan Policy)

City/County of _____; State of _____

On this ____ day of _____, 2019, before me personally appeared the adult named hereinabove, who is personally known to me or produced positive identification, and who executed the foregoing LEGAL AGREEMENT--GENERAL RELEASE, COVENANT NOT TO SUE, LIABILITY WAIVER, AND PERMISSION AGREEMENT and acknowledged that he/she executed the same as his/her free act and deed.

Signature of Notary Public: _____

[NOTARIAL SEAL]

My commission expires: _____

This section for DELEGATION USE ONLY

- Diocesan Safe Environment Training Complete
- Diocesan Third-Party Background Check Complete
- Other _____

**Diocese of Superior
Adult Liability Waiver and Emergency Contacts**

This form must be fully completed and returned to the appropriate parish/school/diocesan office.

Full Legal Name: _____

Address: _____

Date of Birth: _____ Gender: Female Male

Phone – Home: _____ Cell: _____ Work: _____

Email address: _____

Date of Diocesan Background Check: _____ Verified by: _____

Date of Diocesan BASE Training: _____ Verified by: _____

This document is for the following event: **Nov. 21-23, 11 pm Wednesday – 7pm Sunday (Approximately)**

Description: **National Catholic Youth Conference (NCYC) – Indianapolis, IN**

Cost: **\$615 (transferrable but nonrefundable)**

Sponsored by: **DOS Catholic Formation Office**

My signature below indicates my agreement to the following:

- In accordance with the United States Conference of Catholic Bishops' *Charter for the Protection of Children and Young People* AND the Diocese of Superior Safe Environment requirements, I have completed all of the appropriate documentation required to accompany minors on this event specified above.
- I agree to act in accordance with the Diocesan Code of Conduct for Working with Minors, Diocesan Morals & Ethics Policy, Diocesan Chaperone Guidelines, and the directives established for this specific event.
- I fully understand my responsibilities for this event as described to me by parish/school/diocesan staff and/or those planning this activity.
- I further agree on behalf of myself, my heirs, assigns, executors, and personal representatives, to hold harmless and defend (parish name & city) _____, the Diocese of Superior, its officers, directors, agents, employees, or representatives associated with the event specified above from any and all liability claims, loss or damage arising from or in connection with my participation in this activity.
- I agree to inform event organizers of any special concerns or needs I may have.

Signature: _____ Date: _____

EMERGENCY CONTACTS

Name: _____ Relationship: _____

Phone – Home: _____ Cell: _____ Work: _____

Name: _____ Relationship: _____

Phone – Home: _____ Cell: _____ Work: _____

Primary physician: _____ Phone: _____

Health system & location: _____

Health insurance carrier: _____ Policy number: _____

Code of Conduct

Section A. Participant Authorization (Required of All Ages)

- I understand and agree to cooperate with all regulations regarding behavior, health, special qualifications and age.
- I authorize an adult, in whose care I have been entrusted, to consent to X-ray examination, anesthetic, medical, surgical or dental diagnosis and treatment or hospital care, to be rendered to me under the general or specific supervision and on the advice of any physician or dentist licensed under the provisions of the Medical Practice Act. If I am not a minor, I will be liable and agree to pay all costs and expenses incurred in connection with such medical and dental services rendered to me pursuant to this authorization.
- I understand the general guidelines of behavior: I must respect and obey instructions of the adult(s) in charge and that no smoking, alcohol, illegal drugs, possession of weapons, or sexual misconduct is tolerated.
- I agree to treat all other persons with respect and not cause any intentional harm (physically, emotionally, or spiritually) to any person in any way.
- I agree to respect the property of others, including all program facilities and property.
- I understand that I need to be on time for all check-ins and departure times.
- I will adhere to diocesan guidelines on modesty of dress and conduct.

I agree that if any of these terms are violated, the *Diocese of Superior* can send the participant home at the participant/guardian's expense.

Signature of Participant

Printed Name of Participant

Date