

INTERMISSION 2018

Feb 11, 2018

Grades 8-12

REGISTRATION AND AUTHORIZATION

PLEASE return to Katie Stone @ SJV Parish Center

NAME _____ Grade _____
ADDRESS _____
PARISH _____
PARENT'S NAME _____
PHONE # (home) _____ (cell 1) _____ (cell 2) _____
Doctor's Name _____ Doctor's Phone _____
Doctor's Address _____
Allergies or other known conditions or illnesses _____

(FOR PARENTS) I give my permission for my child(ren) to take part in **INTERMISSION, at St. Adrian Catholic Church, Adrian, MN on Sunday, February 11th, 2018.** In consideration of the opportunity for my child to participate, and fully recognizing that such an undertaking involves an element of risk, we assume all risks and hazards incidental to such participation and do hereby release, absolve, indemnify, and agree to hold harmless the Diocese of Winona, Minnesota, and St. Adrian Church, St. Anthony Church, St. Kilian Church, or Our Lady of Good Counsel Church, their agents, employees and officers and the chaperones, leaders, organizations and sponsors and persons transporting our child(ren) to and/or from these activities. Neither the Diocese of Winona, Minnesota, the St. Adrian Cluster, nor any of said persons shall be held financially responsible for any injury, illness, or death incurred as a direct or indirect result of this activity. We/I, the undersigned, have read this release and understand all its forms and execute it voluntarily and with full knowledge of its significance. In the event of an emergency and I/we cannot be reached, I/we hereby authorize that emergency treatment may be administered.

Signature _____ Date _____
(Parent or Guardian)

In case of injury or illness, contact: _____ at _____
If Parent cannot be reached, contact: _____ at _____

Identify planned activities that your child should not participate in:

****The undersigned parent/guardian hereby consents that the Diocese of Winona be permitted to use and publish for advertising, commercial or publicity purposes, the photograph or video of my child for lawful purpose and the undersigned does hereby release the Diocese of Winona from any liability in connection with such use.

Parent/guardian signature: _____ Date: _____