

Parent Permission Form For With Great Power Confirmation Retreat

Dear Parent or Legal Guardian:

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

Name of the Event: With Great Power 1st Year Confirmation Retreat

Destination: Bernard Catholic Church

Designated Supervisor of Activity: Chad Roden

Date and Time of Departure: February 23rd 9:00 AM – 6:00 PM

Cost: None, however your child will need to bring a lunch

If you would like your child to participate in these events, 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.

Your Child is expected to bring a lunch for this retreat.

*******Statement of Consent*******

I herby consent to participation by my child, _____, in the events described above. I understand that my child will be under the supervision of the designated parishes' employee during the With Great Power 1st Year Confirmation Retreat. I further consent to the conditions stated above on participation in these events, including the method of transportation.

In consideration of my child being allowed to participate in this event, I herby agree on behalf of myself and my child to release St. Joseph and SS. John and Bernard Parishes, the Roman Catholic Diocese of Kalamazoo, and any affiliated organizations, their employees, agents and representatives, including volunteer drivers (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's participation in the retreat. In the event this release on behalf of myself and/or my child is held to be invalid or unenforceable, I herby agree to indemnify and hold harmless 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'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 St. Joseph and Sts. John and Bernard Parishes to publish my child's name, photo or video image in connection with a feature story, or other publication as deemed appropriate by the parishes.

(Print Parent Name)

(Parent's Signature)

(Date)

Please return this **ENTIRE** form to the Parish Offices by February 15th.

Please list any allergies or special instructions related to your child here:
