

Diocese of Jackson Office of Youth Ministry
Abbey Youth Fest 2012 Individual Registration

Check it out at www.abbeyyouthfest.com

St. Benedict, LA

Saturday, March 10, 2012 9:00am – 9:00pm

Name: _____ Current Grade: _____ Birth Date: _____
month/day/year

Student/Adult Cell Phone: _____ Parish and Town: _____

T-shirt size (please circle): S M L XL XXL

Registration:

Early Bird Registration Fee: \$25 per person by January 17 includes entrance, music, events and t-shirt.

Regular Registration Fee: \$30 per person by February 17 includes entrance, music, events and t-shirt.

Transportation:

Charter Bus Fee: \$35 per person.

Snacks:

Bring extra money for on-site snacks (nachos, pickles, ice cream sandwiches, freeze-pops, etc).

Meals:

You have the option to bring your own meals (you will be responsible for keeping up with your meals and keeping them cool) OR pre-order one of these meals below. Meals must be ordered now, you will not be able to order later..

LUNCH – Please check which meal you want.

- _____ \$6.50 Chick-Fil-A Grilled Chicken Sandwich Meal includes chips, drink, cookie
- _____ \$5.50 Hamburger Meal includes chips, drink and cookie
- _____ \$5.50 Hot Dog Meal includes two hot dogs, chips, drink, cookie
- _____ \$5.50 Red Beans & Rice Meal includes container of this classic, drink, cookie
- _____ \$5.50 Pizza Meal includes two slices of Mellow Mushroom pizza, drink, chips
- _____ \$7.00 Chick-Fil-A Fried Sandwich Meal includes chips, drink, brownie

DINNER – Please check which meal you want.

- _____ \$6.50 Chick-Fil-A Grilled Chicken Sandwich Meal includes chips, drink, cookie
- _____ \$5.50 Hamburger Meal includes chips, drink and cookie
- _____ \$5.50 Hot Dog Meal includes two hot dogs, chips, drink, cookie
- _____ \$5.50 Red Beans & Rice Meal includes container of this classic, drink, cookie
- _____ \$5.50 Pizza Meal includes two slices of Mellow Mushroom pizza, drink, chips
- _____ \$7.00 Chick-Fil-A Fried Sandwich Meal includes chips, drink, brownie

Registration Fee	\$25.00 or \$30.00
Bus Fee	\$35.00
No, I Do Not Want Meals	\$00.00
Yes, I Want Meals, Put Total For Meals Here	\$_____
Total Due	\$_____

Abbey Youth Fest 2012 Total Meal Plan

Parish Name _____ Town _____

Please write in total number for each meal listed.

This will be the number ordered, so please be sure that your individual registration meals match this form.

LUNCH – Please check which meal you want.

- _____ \$6.50 Chick-Fil-A Grilled Chicken Sandwich Meal includes chips, drink, cookie
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- _____ \$7.00 Chick-Fil-A Fried Sandwich Meal includes chips, drink, brownie

_____ TOTAL MEALS ORDERED

Abbey Youth Fest 2012 Travel Checklist

Please send this form to Diocese of Jackson Office of Youth Ministry

If traveling in the diocesan group, **EVERTHING** comes to the Office of Youth Ministry.
Do **NOT** send anything to Abbey Fest.

Adult Chaperone Contact: _____

Adult Chaperone Mobile Phone: _____

Adult Chaperone Home Phone: _____

Adult Chaperone Email: _____

Adult Chaperone Mailing Address: _____

_____ AYF Registration Form for All Youth

_____ AYF Registration Form for All Adults*

_____ Diocese of Jackson OYM Abbey Youth Fest 2012 Registration Form for All Youth and Adults

_____ Parish Total Meals Form

_____ Specific Event Form for All Youth

_____ Verify that All Adults are current and in database for Child Protection and Safety**

_____ Do you need housing in the Jackson area***

_____ Pick up South of Jackson***

_____ Check payable to Catholic Diocese of Jackson

_____ Mail to: Office of Youth Ministry
 "Abbey Youth Fest"
 P O Box 2248
 Jackson, MS 39225-2248

*All adults must complete the AYF registration forms and sign them even though they say student/youth.

**Please contact Mrs. Vickie Carollo at 601-960-8471 or vickie.carollo@jacksondiocese.org to verify that all adults are in the Child Protection and Safety database. Please tell her that these adults are attending AYF and she will notify me that they are current. If they are not current or present in the database, Mrs. Carollo will assist in resolving this issue.

***Since we leave very early, 6:00 a.m., if you are traveling from north of Highway 82, you may wish to stay in Jackson on Friday night; we will not arrive back in Jackson until after midnight on Sunday. You may wish to stay in Jackson that evening. If you are south of Jackson, we will be able to pick you up on I-55 at Crystal Springs, Brookhaven, or McComb.

CHECK LIST FOR PARISH ADULT LEADERS TO TRAVEL WITH TO ABBEY YOUTH FEST 2012

_____ **Office of Youth Ministry, Diocese of Jackson Youth Forms, Current and Notarized**

_____ **Office of Youth Ministry, Diocese of Jackson Adult Forms, Current and Notarized**

_____ **One Adult Chaperone for Every Ten (10) Youth**

_____ **Review Policies and Procedures for Abbey Youth Fest 2012 with Entire Group - Adults and Youth**



ABBHEY YOUTH FESTIVAL

S A I N T J O S E P H A B B E Y & S E M I N A R Y C O L L E G E

75376 RIVER ROAD, ST. BENEDICT LA 70457 phone 985.867.2233
e-mail: info@abbeyyouthfest.com www.AbbeyYouthFest.com fax 985.867.2270

AYF 2012: POLICIES AND PROCEDURES

PAYMENT IS DUE IN FULL BY THE DEADLINE DATES:

- Group accounts will close out when payments are received
- Special instructions will be given within your account page for what to do if you must reopen your account to add on to your "PAID OUT" account.

IMPORTANT:

- YOU **MUST** DOWNLOAD A COPY OF THE [POLICIES & PROCEDURES](#), and [LIABILITY & PHOTO RELEASE FORMS](#).
- **EACH PARTICIPANT (adult & youth) MUST BRING A COMPLETED LIABILITY & PHOTO RELEASE FORM.**

PARTICIPANT POLICIES

- The Abbey Youth Festival is for teens and young adults **ages 13 (8th grade) and up**
- 1 chaperone (21 years or older) is required for every 10 teen participants. 18-20 year olds do not classify as chaperones.

WHAT TO BRING, WEAR, AND THE LIKE:

The Abbey Youth Festival is an outdoor event. All of the day's activities will occur in the open air. Therefore, everyone should bring:

- Rain Gear
- Hats, umbrellas, hand water sprayers for cooling – (*The day's sun is hot; a hat is important.*)
- Clothing appropriate to the day's weather (**No tank tops or short shorts for boys or girls!**)
- Backpacks (*Teens should not leave their items unattended – backpacks will ensure their safekeeping.*)
- Comfortable shoes
- Sunscreen, chap stick
- Picnic blankets or tarps for ground sitting (*chairs are not available*)

NOTE: Folding chairs are only allowed around the perimeter of the field and only for use by adults and those who have a special need. Tents, beach umbrellas, and any other shading devices that may obscure vision to the stage must also be kept on the perimeter of the field.

WHAT NOT TO BRING:

- Alcohol, cigarettes, illegal drugs, firearms
- Laser pointers, fireworks, noisemakers, gag items
- Candles, lighters, and matches

- “Free Hugs” signs (*While most teens mean well, these signs have at times, been used to coerce members of the opposite sex to hug people whom they would rather not touch at all.*)
- **Headphones, personal stereo and CD players, video games** and other entertainment devices (Cell phones should be turned off during the event – *Leaders, please help in encouraging this.*)
- **Football, frisbees, baseballs and any other throwing games** are not allowed on the site. Participants will be required to return these items to the vehicle in which they came to the Festival. The Festival Site has no room for ball games. Youth Ministers must be proactive in deterring teens from such games, especially during talks. (*Anyone who does not understand this rule is welcome to call us at 985-867-2233 or email info@abbeyyouthfest.com ; we’ll be happy to explain*).

SMOKING POLICY:

No smoking will be allowed during the festival events, nor will smoking be allowed in the main gathering area. Louisiana State Law prohibits the use of tobacco products by anyone under 18 years of age.

CANCELLATION POLICY:

- Because the Abbey Youth Festival is an outdoor event, severe weather and/or prolonged inclement conditions may necessitate complete cancellation, changes of schedule, or early completion of Festival events. All efforts will be made to ensure that the Abbey Youth Festival is not canceled insofar as this is possible and safe for all participants (But “acts of God,” are indeed in His hands, not ours.)
- If an entire group or individuals of a particular group decide not to attend AYF, a refund MAY be available if cancellations are made at least 30 days from the day of the event. Inside 30 days, no refunds will be provided. It will be up to the group leader to fill any vacant spots. (*Status of all refunds changes after T-shirts have been ordered, and is contingent upon date of needed cancellation.*)

ARRIVAL AND DEPARTURE TIMES: (see link for details)

- Arrival & Registration - 9:30am
- Opening Session - 10:45am
- Closing & Departure - 9:00pm

PARKING:

- Parking for the Festival will be within the Abbey grounds. Attendants will direct vehicles to the parking area, and then participants will disembark.

MEALS AND SPENDING MONEY:

- **NEW POLICY:** Like AYF 2011, all lunch and dinner meals will be pre-ordered as part of the registration process via meal “tickets.” Menu choices are available here ([insert link](#)). No cash will be accepted at food and beverage booths - rather, **ONLY** colored meal tickets will be accepted. (Additional food and drink tokens worth .50 cents each will be available for purchase on-site for drinks, snacks and “seconds” towards the end of meal-times.)

- Prices have been coordinated so as to allow participants to purchase full meals, via pre-orders, for approximately \$5.00 to \$7.00 per meal.
- Also available are many religious articles, T-shirts, books, and Catholic/Christian music CD's, including the CD's and productions of our presenters. These items help to keep the spirit of the day alive. These items will need to be purchased with cash. Tokens and tickets will not be accepted at vendor tents.
- **IMPORTANT NOTE:** All vendor and exhibitor booths will be CLOSED during the keynote talk and prayer sessions of the day. Any vendors or teens that dishonor this policy will be warned, and then, if persisting in their disobedience, will be asked to leave AYF. This is VERY important in order for the good of all involved in the day. Youth ministers, please be clear about this with your teens BEFORE you arrive on site, so we are all on the same page.

WRISTBAND POLICY:

- Upon arrival at the Abbey Youth Festival, each participant will receive a wristband and Festival program with a schedule, song lyrics, and other pertinent information. All pre-purchased meal tickets and T-shirts will also be given to the Group Leader for distribution.

Wristbands must be worn at all times!

DIRECTIONS TO THE ABBEY YOUTH FESTIVAL:

FROM NEW ORLEANS:

- **Take the Causeway North.** Travel on US 190 past I-12, past LA-21 (go over the small bridge), and continue on US 190 past LA 437. Stay on US 190 until the junction of US 190 and LA 25 (Traffic light at junction; Shell Service Station on your left at the corner).
US 190 turns off to the left toward Hammond. **DO NOT** go left. Instead, continue North on LA-25 for only about 300 yards. Turn right on **Airport Road** (where you see the Oak Tree Golf Course and Driving Range). Stay on **Airport Road** until you reach a stop sign at the end of the road. Turn left onto **River Road**. Travel about 400 yards until you see a **sign for Saint Joseph Abbey.** Turn right on the bridge. Welcome!

FROM BATON ROUGE:

- **Take I-12 East, and exit at EXIT 63-B (Covington).**
- Once you exit, you will head north on US 190, past LA-21 (go over the small bridge), and continue on US 190 past LA 437. Stay on US 190 until the junction of US 190 and LA 25 (Traffic light at junction; Shell Service Station on your left at the corner).
- US 190 turns off to the left toward Hammond. **DO NOT** go left. Instead, continue North on LA-25 for only about 300 yards. Turn right on **Airport Road** (where you see the Oak Tree Golf Course and Driving Range). Stay on **Airport Road** until you reach a stop sign at the end of the road. Turn left onto **River Road**. Travel about 400 yards until you see a **sign for Saint Joseph Abbey.** Turn right on the bridge. Welcome!

FROM SLIDELL:

- **Take I-12 West, and exit at EXIT 63-B (Covington).**
- Once you exit, you will head north on US 190, past LA-21 (go over the small bridge), and continue on US 190 past LA 437. Stay on US 190 until the junction of US 190 and LA 25 (Traffic light at junction; Shell Service Station on your left at the corner).
- US 190 turns off to the left toward Hammond. **DO NOT** go left. Instead, continue North on LA-25 for only about 300 yards. Turn right on **Airport Road** (where you see the Oak Tree Golf Course and Driving Range). Stay on **Airport Road** until you reach a stop sign at the end of the road. Turn left onto **River Road**. Travel about 400 yards until you see a **sign for Saint Joseph Abbey**. Turn right on the bridge. Welcome!

CONTACT:

Brian Butler -- AYF Coordinator

Kit Friedrichs-Baumann - Special Events Coordinator, SJASC

Saint Joseph Abbey and Seminary College

P.O. Box 515

St. Benedict, LA 70457 phone:

985.867.2233

info@abbeyyouthfest.com



ABBEY YOUTH FESTIVAL

S A I N T J O S E P H A B B E Y & S E M I N A R Y C O L L E G E

75376 RIVER ROAD, ST. BENEDICT, LA 70457 phone 985.867.2233
e-mail: info@abbeyyouthfest.com www.AbbeyYouthFest.com fax 985.867.2270

LIABILITY & PHOTO RELEASE FORMS (2 pages)

Participant's Name _____ Date of Birth: _____
Address _____ Telephone: _____
City _____ State _____ Zip Code _____
School or Group Name _____
Group Leader's Name _____

PARENT/GUARDIAN

I, _____ (name), give permission to my above mentioned son/daughter to attend the Abbey Youth Festival to be held on **March 10, 2012**. If needed for health reasons, I give permission for my child to be evaluated, diagnosed, treated, and/or given medication in accordance with standard medical practice by appropriate health care personnel. I release St. Joseph Abbey and St. Joseph Seminary College and its agents of all responsibility and consequences that may arise as a result of any injury suffered and resulting treatment. Further, I agree to accept any and all financial responsibility as a result of scheduling medical treatment.

I have read, and my child agrees to abide by all the rules and regulations as listed on the "Abbey Youth Festival 2012 Policies and Procedures" sheet as they are enforced by the Festival staff. I understand that St. Joseph Abbey and St. Joseph Seminary College will not be liable if my child fails to cooperate with regulations, and that any infraction of the rules may result in immediate dismissal from the Abbey Youth Festival at my expense.

Signature of Parent/Legal Guardian _____ Date _____

Family Physician Telephone #: _____

Allergies _____

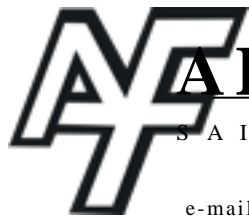
Current Medications _____

Medical History _____

IN CASE OF AN EMERGENCY, PLEASE CONTACT:

Name:	Name:
Address:	Address:
Home Phone:	Home Phone:
Work or Cell Phone:	Work or Cell phone:

**** FORMS MUST BE COMPLETED BY EACH PERSON ATTENDING! ****



ABBHEY YOUTH FESTIVAL

S A I N T J O S E P H A B B E Y & S E M I N A R Y C O L L E G E

75376 RIVER ROAD, ST. BENEDICT, LA 70457 phone 985.867.2233

e-mail: info@abbeyyouthfest.com www.AbbeyYouthFest.com fax 985.867.2270

PHOTOGRAPHY CONSENT AGREEMENT & RELEASE OF LIABILITY

(Adult & Minor Participant Form)

In consideration of the taking and use of the photographs of the named below ("Adult" or "Minor"), for good and valuable consideration herein acknowledged as received, I hereby grant to the Abbey Youth Festival and St. Joseph Abbey and Seminary College the irrevocable and unrestricted right and permission to take, use, re-use, publish, and republish photographic pictures of the "Adult or Minor" or in which the "Adult or Minor" may be included, made through any medium and in any and all media now or hereafter known for illustration, promotion, art, editorial, advertising, trade, or any other purpose whatsoever. I also consent to the use of any published matter in conjunction therewith.

I hereby waive any right that I or the Minor may have to inspect or approve the finished product or products and the advertising copy or other matter that may be used in connection therewith or the use to which it may be applied.

In exchange for the benefits derived by my participation and/or the Minor's participation in this project, I hereby agree that I, my heirs, distributees, guardians, legal representatives, and assigns do release and will indemnify, hold harmless the photographer, Abbey Youth Festival, its agents, and St. Joseph Abbey and Seminary College for claims for libel or violation of any right of publicity or privacy arising out of or in connection with my participation or the Minor's participation in the photography project, from whatever cause, including the active or passive negligence of the photographer, Abbey Youth Festival, its agents, or St. Joseph Abbey and Seminary College.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS.
I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND SIGN IT OF MY OWN FREE WILL.

Participant: Minor (Print Name) _____

Signature of Parent/Guardian for consent: _____

Print Parent's Name: _____

Participant: Adult (Print Name) _____

Signature of Adult: _____

FORM A

PARENT/GUARDIAN CONTINUING CONSENT FORM AND LIABILITY WAIVER (page 1)

Participant's Name _____ Date of Birth _____

Home Address _____ City/Zip _____

Parent(s)/Guardian(s) _____

Home Phone _____ Parent(s) Work Phone _____ Parent(s) Cell Phone _____ Parent(s) Email _____

Emergency Contact NOT Living at Home Address/Name _____ Phone _____

Relationship _____ Physician _____ Phone _____

Parish and Town _____ Age _____ Sex _____ Grade in Fall of Year Form Completed _____

Participant's Email _____ Participant's Cell Phone _____ T-Shirt Size (circle one) S M L XL 2X

Providing the email address and cell phone number grants permission for electronic communication from group leader(s) to this young person in regards to all group activities.

If you do not want your child to be contacted via electronic communication, please check here. _____

If you want to be copied on any electronic communication to your child, please check here. _____

If participant is 18 years or older, consent must be signed by the participant **and** parent(s).
I (name of parent/guardian) _____ and (name of participant) _____
grant permission and request that my child/I _____ be allowed to participate
in all parish and/or diocesan events.

I understand that each fiscal year, I will be provided with Form B, Annual Update to recognize any changes recorded in this consent and liability form.

I understand that for each separate event, I will be provided a Form E, Specific Event Consent and Release to sign. This form will give the exact name of the event, date, time and location and ONLY this form will be acceptable. You are encouraged to have current photo identification for your child to carry at all times.

I further understand and recognize that this agreement is a continuing one and valid on a continuing basis so long as I/my child participate in diocesan events. My child's/my participation in this event is voluntary. In consideration of this and other things, I release, discharge, indemnify and hold harmless the chaperones or their agents from any liability for my child's/my physical injury, including death or illness. I release, discharge and agree to hold the chaperone harmless from any and all claims arising out of or accruing during the trip. I agree and consent that my child's/my release, discharge, indemnity and hold harmless shall be binding upon me as parent, guardian and/or next friend of my child, and shall be binding upon my child's/my estate, heirs, personal representatives and assigns. I also agree to defend, indemnify and hold harmless the chaperones from any claim asserted by my child/me should my child repudiate his or her release after obtaining adulthood. I understand that the Roman Catholic Church, the Roman Catholic Diocese of Jackson or any Roman Catholic Church/Parish shall not be liable, in any way, for any injury, including death or illness, which may occur during the event.

VIDEO/PHOTOGRAPHY CONSENT

As parent/guardian/adult participant, I understand that promotional pictures and videos (individual and group) may be taken during this event. I give permission for my son's/daughter's/ward's/my picture to be used for promotional materials (newsletter, web page, calendars, power point, video etc.) on highlighting this event.

Rvd 8/11

FORM A

PARENT/GUARDIAN CONTINUING CONSENT FORM AND LIABILITY WAIVER (page 3)

Youth Code of Conduct

No drugs, tobacco, alcohol, fireworks, matches, cigarette lighters, devices or weapons that would endanger people, animals or property.

Clothing should be appropriate which prohibits short shorts, tank tops, baggy pants, bikinis, any showing of underwear, any reference to alcohol/tobacco products including insignias or advertisements. We reserve the right to declare clothing inappropriate.

Language and behavior should exemplify Christian values.

Participants will respect the rights and property of others. Neither vandalism nor stealing will be tolerated. Financial obligations that results from such behavior, will be the sole responsibility of the youth and his/her family.

Males and females are not, at any time, to be in each other's sleeping quarters.

If applicable, you must wear the required event identification at all times.

Participants may not leave the event site without the express permission of the event coordinator.

Personal electronic devices are only permitted at specified times and may be collected and held by adult leaders to ensure compliance.

Participants must adhere to stated curfew.

Maintain the spirit of the event by attending all meetings on time and in their entirety.

Participants will abide by any other rules as specified for a specific event and no individual adult may interfere or void these.

Participants are responsible for personal belongings.

Participants are to go immediately to a trusted adult to discuss any problems that may occur.

I have read the foregoing and understand the Code of Conduct and will abide by it and any other event specific rules. I understand and agree that my parents or guardians will be notified at the time of any infraction requiring my dismissal from the event and that I will be sent home at (my)/the expense of my parents or guardians. Should the infraction violate local or state ordinances, or laws, the misconduct may be reported to the authorities.

Signature of Participant

Date

I agree that my child is expected to abide by all rules as outlined in the Code of Conduct and any other event specific rules and if my child fails to abide by this code, he/she will be dismissed from this activity and sent home at his own/my expense with no right of reimbursement. Should the infraction violate local or state ordinances or laws, the misconduct may be reported to the authorities.

Signature of Parent or Guardian

Date

FORM A

PARENT/GUARDIAN CONTINUING CONSENT FORM AND LIABILITY WAIVER (page 4)

In signing Form A, PARENT/GUARDIAN CONTINUING CONSENT FORM AND LIABILITY WAIVER, I certify that all information contained herein is true and accurate to the best of my knowledge.

NOTARY

STATE OF _____

COUNTY OF _____

This day personally came and appeared before me the undersigned authority in and for the aforesaid jurisdiction, the within named

who, being by me first duly sworn, stated on his/her oath that the matters and things contained and set forth in the above and foregoing application are true and correct as therein stated.

Signature of Parent or Guardian

Printed Name of Parent or Guardian

Signature of Participant 18 years or older

Printed Name of Participant 18 years or older

Sworn to and subscribed before me on this the _____ day of _____, 20_____.

Notary Public

My Commission Expires:_____

SEAL

FORM E

SPECIFIC EVENT¹ REQUEST, CONSENT AND RELEASE

I request and give my permission for my child _____

to attend the following listed specific event:

EVENT: _____

SITE: _____

DATE: _____

TIME: _____

Signature of Parent or Guardian

Printed Name of Parent or Guardian

Date

Signature of Participant 18 years or older

Printed Name of Parent or Guardian

Date

¹ The designated event may be a recurring event in which instance this Consent and Release applies with equal force to each occasion of any such recurring event.

In other words, if you visit your local retirement facility every third Thursday of each month, Form E will only be completed one time for that particular event and applies to all such visits.

FORM B

ANNUAL UPDATE

I acknowledge having executed Form A, Parent/Guardian Continuing Consent Form and Liability Waiver, or Form C, Adult Youth Ministry Leader/Chaperone Medical Release and Liability Form, and that it remains in effect, thus, releasing Office of Youth Ministry, Office of Youth Ministry staff, parish and parish staff, additional chaperones and the Diocese of Jackson from any and all liabilities and waive all claims against them; and, requesting that proper medical treatment be obtained for my child should it become necessary.

Please check all items which apply:

_____ Since execution of Form A, **there have been no changes** in home address, home telephone number, employment numbers, mobile phone numbers, email addresses, emergency contact or other pertinent information for my child (me).

_____ Since execution of Form A, **there have been changes** in home address, home telephone number, employment numbers, mobile phone numbers, email addresses, emergency contact or other pertinent information for my child (me). These changes are listed below.

_____ Since execution of Form A, there **have been no changes** in medication or medical conditions for my child (me).

_____ Since execution of Form A, there **have been changes** in medication or medical conditions for my child (me). These are listed below.

_____ Since execution of Form A, there **have been no changes** in insurance coverage for my child (me).

_____ Since execution of Form A, there **have been changes** in insurance coverage for my child (me). These are listed below.

Please include a copy of any new or updated insurance card.

Signature of Parent/Guardian/Adult Printed Name of Parent/Guardian/Adult Date

Signature of Participant 18 years or older Printed Name of Participant 18 years or older Date

FORM C ADULT YOUTH MINISTRY LEADER/CHAPERONE MEDICAL RELEASE AND LIABILITY FORM (page 1)

I, _____, do hereby release, indemnify, hold harmless and discharge the Catholic Diocese of Jackson, the parish, its staff and volunteers from any and all liability, claim, loss, damage, cost or expense arising from my participation in any event. I waive any such claims against such organization or any such person, arising directly or indirectly from or attributable, in any legal way, to any action or omission to act of any such organization or person in connection with execution of any event. I authorize treatment by a licensed medical physician or licensed medical professional or team in case of any accident or illness that may so arise, or any hospitalization necessary. I further understand and recognize that my participation in this trip is voluntary. In consideration of this and other things, I release, indemnify and hold harmless the chaperones or their agents from any liability for my physical injury, including death or illness. I consent to release, indemnify and agree to hold the chaperones harmless from all claims arising out of or accruing during the trip. I agree and consent that my release, indemnity and hold harmless shall be binding upon my estate, heirs, personal representatives and assigns. I understand that the Roman Catholic Church, the Roman Catholic Diocese of Jackson or any Roman Catholic Church/Parish shall not be liable, in any way, for any injury, including death or illness, that may occur during the trip.

I have undergone the Child Protection and Safety training and personal background check as mandated by the Catholic Diocese of Jackson both of which are current and up to date.

Print Name

Street Address

City

State

Zip Code

Parish and Town

Home Telephone

Mobile Telephone

Physician's Name

Physician's Telephone Number

The following information is pertinent and necessary if you are rendered unconscious.

Date of Birth (including year) _____ Age _____ Date of Last Tetanus Vaccine _____

Please list ALL medications, prescription and/or nonprescription you are taking.

_____ No, I do not carry medical insurance.

_____ Yes, I carry medical insurance.

Insurance Carrier: _____

Name of Policy Holder: _____

Policy Number: _____

Name of Emergency Contact: _____

Emergency Contact Telephone: _____

Please include of a copy of your medical insurance card (front and back).

Payment in full for medical care is the responsibility of the patient.

In signing this Medical Release and Liability Form I agree to abide by the Code of Conduct and any and all event specific rules. Should I not be able to maintain the guidelines and expectations of the adult chaperones, I understand there will be consequences for my actions, which could include being asked to leave the event.

Signature of Adult Youth Ministry Leader/Chaperone

Printed Name of Adult Youth Ministry Leader/Chaperone

Date

FORM C ADULT YOUTH MINISTRY LEADER/CHAPERONE MEDICAL RELEASE AND LIABILITY FORM (page 2)

In signing Form C, ADULT YOUTH MINISTRY LEADER/CHAPERONE MEDICAL RELEASE AND LIABILITY FORM, I certify that all information contained herein is true and accurate to the best of my knowledge.

NOTARY

STATE OF _____

COUNTY OF _____

This day personally came and appeared before me the undersigned authority in and for the aforesaid jurisdiction, the within named

who, being by me first duly sworn, stated on his/her oath that the matters and things contained and set forth in the above and foregoing application are true and correct as therein stated.

Signature of Parent or Guardian

Printed Name of Parent or Guardian

Signature of Participant 18 years or older

Printed Name of Parent or Guardian

Sworn to and subscribed before me on this the _____ day of _____, 20_____.

Notary Public

My Commission Expires: _____

SEAL