

COLUMBUS DIOCESAN OFFICE OF YOUTH AND YOUNG ADULT MINISTRY  
ST. JOHN NEUMANN

**REGISTRATION AND PARENT/GUARDIAN CONSENT FORM**

**One form for each student (8<sup>th</sup> grade through high school) must be completed each year for participation in St. John Neumann Youth Ministry Activities and Retreats**

*Please print clearly; return with appropriate payment to your adult leader. All incomplete forms will be returned.*

Parish: St. John Neumann Church

Address: 801 W. Cherry St. Suite 120 Sunbury, OH 43074 Church Grounds 9633 Rt. 37, Sunbury

Name of Adult Leader(s): Tina Burtch (614-419-6004), Kerrie Ritchey (740-881-0651)

Name of Participant \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone ( ) \_\_\_\_\_

E-Mail \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Male  Female  Grade \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION**

Parent or Guardian \_\_\_\_\_

Address \_\_\_\_\_

Phone(s) \_\_\_\_\_

Another Contact, if above can not be reached: Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Chronic Conditions (e.g. Allergies, Epilepsy; Diabetes) \_\_\_\_\_

Medications \_\_\_\_\_

Medical Insurance \_\_\_\_\_ Policy Number \_\_\_\_\_

Address \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Member's Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Family Doctor \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Family Denist \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Preferred Hospital \_\_\_\_\_ Phone ( ) \_\_\_\_\_

**RELEASE AND INDEMNIFICATION AGREEMENT**

Name of Activity Retreat(s) Youth Ministry Activities 2010-2011

Location Heartland Retreat Center St. John Neumann Parish Grounds

Dates of Activity August 2011-July 2012 August 2011 – July 2012

A. As the above-named participant, I hereby agree to the terms of this Release and Indemnification Agreement, and I agree to comply with the Code of Behavior set forth below.

B. As a parent or guardian of the above-named participant, I give my permission for my child or ward to register for and attend the activity.

C. The undersigned release from all liability, and indemnify and hold harmless St. John Neumann parish, the Diocese of Columbus and any employee, agent or representative thereof from any and all liability, actions, causes of actions, claims, judgments, costs or expenses, arising out of or in any way related to injury, illness or loss incurred by the participant while participating in or traveling to or from this activity.

**CODE OF BEHAVIOR**

1. Participants must stay and participate in the entire event. Participants may not leave the premises unless accompanied by an adult leader, parent, or legal guardian.
2. The possession or use of alcohol, tobacco, drugs, or weapons of any kind is not permitted.
3. Foul language is not tolerated.
4. Participants must heed any and all directions of activity staff.
5. Participants must respect the rights and property of others. Damage to or defacing of property will be the financial responsibility of the participants involved and the participant’s parents/legal guardians..
6. Failure to abide by this Code of Behavior may result in a request to parents/legal guardians, to transport offending participants from the premises, and the parents/legal guardians shall immediately comply with the request.

**TRANSPORTATION**

If transportation is required during the event, I give permission for my child, \_\_\_\_\_ to ride with a driver 25 years or older. As a parent/guardian, I remain legally responsible for any personal actions taken by the above named minor participant during the event.

If my child is a licensed driver, I give my child permission to drive to and from the event. I understand that if I grant permission for my child to drive OR ride other person(s) under the age of 25, I will provide written documentation of this arrangement. Permission will not be granted without written permission from all parties involved.

Pictures of the above mentioned participant may be used on the church website, church group on social networking sites such as but not limited to Facebook (public domain) and church bulletin board. \_\_\_\_\_ accept \_\_\_\_\_ decline. Circle acceptable venues.

Participant is \_\_\_\_\_ is a member of St. John Neumann or \_\_\_\_\_ is a guest of a member of St. John Neumann

**I HAVE READ AND UNDERSTAND ALL  
CONTAINED IN THIS AGREEMENT**

Participant’s Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Legal Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Participant’s T-Shirt Size (Circle One): Adult Small Adult Medium Adult Large XL other \_\_\_\_\_