



Catholic Area Faith Community of Jesus Our Living Water
Our Lady of the Lakes, Spicer; St. Clara, Clara City; St. Mary, Willmar
Permission Form

Name of Event: _____ Date of Event: _____

Participant must be registered by his/her own parent/guardian.	Participant Name: _____	Grade: _____
	Participant Name: _____	Grade: _____
	Participant Name: _____	Grade: _____
	Participant Name: _____	Grade: _____

Parent/Guardian Name: _____

Mom Phone: _____ Dad Phone: _____

Email: _____

(You will receive an email with details regarding the event.)

Medical Insurance Company: _____ Policy #: _____

Special Concerns (allergies, medications, etc.): _____

Will you help chaperone this event? Yes No (We would love to have you join us!)

If traveling by bus, participant(s) will be meeting the bus at: Our Lady of the Lakes St. Mary

If you are not a parishioner but are attending with a friend, please write his/her name: _____

Parent/Guardian Consent: I, the above named parent/legal guardian of the above named participant(s), request that he/she/they be permitted to attend the above listed event with the Catholic Area Faith Community of Jesus Our Living Water. I agree and consent to have the staff members and chaperones, under whose auspices the event is conducted, secure any emergency medical care or treatment that may be necessary for my child(ren) during the event. I further assume all responsibility for the decisions, emergency care or treatment made by the above named youth. I hereby release and hold harmless the Diocese of New Ulm, the Catholic Area Faith Community of Jesus Our Living Water and its member parishes and their staff, and all volunteer leaders from any and all claims, losses, costs, damages or expenses from any accidents or occurrences causing injury or loss to any person or property during this event.

Code of Conduct: The following are a few simple rules all participants are expected to follow while participating in this event. Participants will: (1) treat all other persons with respect, not cause any intentional harm (physically, mentally, emotionally, or spiritually) to any other person in any way (2) respect the property of others including all programs facilities and property (3) follow all appropriate instructions of all personnel aiding this event, including, but not limited to chaperones, staff, transportation personnel and administration (4) not use, sell or transport tobacco, alcohol or any other controlled illegal substance. If medication is needed, my parent/legal guardian will inform the event coordinator and/or the appropriate staff before the event.

I, the parent/guardian have read and discussed the above Parent/Guardian Consent and Code of Conduct with the participants listed above and take full responsibility for their actions at the above listed event.

Parent/Guardian Signature: _____ Date: _____