

**St. Aloysius Junior High Youth Group: 2018 End of the Year Party  
Sunday, April 22, 2018 at the St. Aloysius School Gym**

**Bring a bathing suit, towel, and change of clothes!  
Drop off at 10:30 am, Pick up at 12:30 pm**

**Consent Form and Liability Waiver**

**Participant Information**

Name: \_\_\_\_\_  
Home Address: \_\_\_\_\_ Zip: \_\_\_\_\_  
Grade: \_\_\_\_\_ Birth Date: \_\_\_\_\_

***You may purchase a Green God Staff T-Shirt (adult sizes only: S M L XL) for \$10.00.***

**Parent/Guardian Information**

Name(s): \_\_\_\_\_  
E-mail (please write clearly): \_\_\_\_\_  
Home Phone: \_\_\_\_\_  
Cell Phone: (mom) \_\_\_\_\_ (dad) \_\_\_\_\_

<p><b><i>Are you willing to chaperone?    Yes    No    Chaperone Name: _____</i></b></p> <p><b><i>Chaperone Phone: _____    Email: _____</i></b></p>
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I, \_\_\_\_\_ grant permission for my child, \_\_\_\_\_, ("participant") to participate in this parish event, including playing on inflatables, that will take place under the guidance and direction of parish employees and/or volunteers from St Aloysius Catholic Church.

A brief description of the activity follows:

- Type of event: End of the year party
- Date of event: Sunday, April 22, 2018
- Destination of event: St. Aloysius Gym
- Individual in charge: MacDougall Womack
- Estimated time: Drop off at **10:30 am**, Pick up at **12:30 pm**
- Mode of transportation to and from event: must provide own transportation.

As parent and/or legal guardian, I remain legally responsible for any personal actions taken by participant. I agree on behalf of myself, my child named herein, or our heirs, successors, and assigns, to hold harmless and defend St. Aloysius Catholic Church, its officers, directors, employees, chaperones, and agents, and the Diocese of Baton Rouge, its employees and agents, chaperones, or representatives associated with the event, from any claim arising from or in connection with my child attending the event or in connection with any illness or injury (including death) or cost of medical treatment in connection therewith, and I agree to compensate St. Aloysius Catholic Church, its officers, directors and agents, and the Diocese of Baton Rouge, its employees and agents and chaperones, or representative associated with the event for reasonable attorney's fees and expenses which may incur in any action brought against them as a result of such injury or damage, unless such claim arises from the negligence of the parish or the Diocese of Baton Rouge.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please return this form to MacDougall Womack in the Pastoral Services Center.**