

Our Lady of Perpetual Help Parish

**PARENT/GUARDIAN CONSENT FORM AND LIABILITY WAIVER**

PARTICIPANT'S NAME

\_\_\_\_\_

Sex \_\_\_\_\_ Date of Birth \_\_\_\_\_ Soc. Sec. # \_\_\_\_\_

PARENT/GUARDIAN'S NAME

(print) \_\_\_\_\_

Home Address

\_\_\_\_\_

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

Home Phone (\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_

In case of emergency, please contact:

Relationship: \_\_\_\_\_ Phone Number (\_\_\_\_) \_\_\_\_\_

*I, (Parent/Guardian named above) grant permission for my child (Participant named above) to participate in this event. I understand that this event will take place under the guidance and direction of parish employees and/or volunteers from the parish. My understanding of the event is:*

EVENT:

\_\_\_\_\_

Place/destination:

\_\_\_\_\_

Individual in Charge:

\_\_\_\_\_

Date(s) and Time (s):

\_\_\_\_\_

Mode of Transportation:

\_\_\_\_\_

*As parent/legal guardian, I remain legally responsible for any personal action taken by my child. I agree to hold harmless Our Lady of Perpetual Help Parish, and the Diocese of Richmond as well as its officers, directors, agents, chaperones, or representatives associated with this event, arising from or in connection with my child attending this event, or including but not limited to accidents, emergencies, exposure to reckless conduct of persons.*

I hereby give consent to and authorize use of photography or videos of Participant by Our Lady of Perpetual Help for promotional or other uses as it deems fit. \_\_\_\_\_ Yes \_\_\_\_\_ No

PARENT/GUARDIAN SIGNATURE:

\_\_\_\_\_ Date \_\_\_\_\_

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Parent/Guardian copy of event details (cut on dotted line and save this portion)

EVENT:

\_\_\_\_\_  
Place/destination:

\_\_\_\_\_  
Individual in Charge:

\_\_\_\_\_  
Date(s) and Time (s):

\_\_\_\_\_  
Mode of Transportation:  
\_\_\_\_\_