Participant’s Name:

Parent/Guardian’s Name:

Home Address:

Home Phone: Business: Cell:

School / City: ­

Date of Birth: Male \_\_\_\_\_ Female \_\_\_\_\_

**REQUEST FOR PERMISSION:**

As parent and/or legal guardian, I give permission for my child named above to participate in following activities at (School) although my child is not enrolled as a full-time student in the referenced school. Please select the general area of participation and specify the activity participating in.

 Classes

 Sports

 Band / Drama

 Religious activities

 Field Trips

 Other

As parent and/or legal guardian, I, , remain legally responsible for any personal actions taken by my child while participating in the activities indicated above.

I am aware that participating in school related activities may involve travel to practices and games. I acknowledge and accept the risks involved with my child’s travel. I further understand that participation in school related activities, including but not limited to sports, presents to my child the risk of harm, including, but not limited to, serious personal injury or death. I acknowledge that because my student is not enrolled as a full-time in the above referenced school, my child will not be entitled to insurance coverage through school, parish or Diocese.

In consideration of my child being allowed to participate in the activity(ies) indicated above, I hereby RELEASE AND AGREE TO INDEMNIFY AND HOLD HARMLESS the Catholic Diocese of Peoria, the parish, the school, coaches, teachers, staff, chaperones, volunteers or representatives associated with the event, and their employees and agents, from any and all liability for injuries, damages, medical expenses, or any other loss to my child or family or me (including attorneys’ fees) arising from or related to my child’s participation.

As a parent/guardian, I further acknowledge that I am a role model and will conduct myself according at all school related events. I give my consent and approval for my child’s name and picture to be printed in any program, publication, or video related to the activity they are participating in. Any questions I have concerning my child’s participation have been answered.

Signature: ­ Date: