

## PARENT PERMISSION FORM FOR PARTICIPATION

Dear Parent or Legal Guardian:

Your son/daughter is eligible to participate in a parish-sponsored activity overnight on church premises. This activity will take place under the guidance and supervision of employees from St Margaret of Scotland Parish.

Name of Event: **Picnic at Bishop Lake**

Date and Time: **Wednesday, August 7th from 1100 AM – 4:30 PM**

Student Cost: **\$20.00**

Designated Supervisor of Activity: **Cindy Powers**

If you would like your child to participate in this event, please complete, sign, and return the following statement of consent and release of liability. As parent or legal guardian, you remain fully responsible for the actions and conduct of your child.

\*\*\*\*\***STATEMENT OF CONSENT**\*\*\*\*\*

I hereby consent to participation by my teen, \_\_\_\_\_, in the event described above. I understand that this event will take place away overnight on the parish grounds and that my child will be under the supervision of the designated parish employee on the stated dates. In consideration of my child being allowed to participate in this field trip, I hereby agree on behalf of myself and my child, to release St. Margaret of Scotland Parish, the Roman Catholic Archdiocese of Detroit, and any and all affiliated organizations, their employees, agents and representatives, including volunteer drivers (collectively "Releasees"), from any and all claims, including negligence, which may be asserted by me or my child, or on behalf on my child, arising from or relating to my child's participation in the Lock-In. In the event this release on behalf of myself and/or my child is held to be invalid or unenforceable, I hereby agree to indemnify and hold harmless Releasees from any and all claims, including negligence, which may be asserted by me or my child, or on behalf of my child, arising from or relating to my child's participation in the Lock-In. This release or indemnification does not apply to claims for intentional misconduct or gross negligence; nor does this release or indemnification apply to the extent of commercial insurance coverage for any claim, but this Release or Indemnification shall apply to the extent of any self-insurance or deductible applicable to any claim.

\_\_\_\_\_  
(Print Parent's or Guardian's Name)

\_\_\_\_\_  
(Parent's or Guardian's Signature)

\_\_\_\_\_  
(Date)

Emergency number where parent can be reached \_\_\_\_\_