

Holy Spirit Confirmation Program Activity Permission Form

As a part of the on-going Service portion of the Confirmation Program, the Confirmandi may be given the opportunity to engage in service at various locations. Teens would travel in the company of adult teachers, co-ordinators and volunteers to and from the activity locations. These sites may include, but are not limited to:

- St. Elizabeth Shelter in Lorain
- St. Joseph Parish, Avon Lake
- Independence Village in Avon Lake
- the Convent of the Poor Claire's in Rocky River
- St. Augustine Manor in Cleveland,,
- Boremeo Seminary in Wickliffe,
- the homes of individual St. Boniface Parish parishioners (delivering Christmas presents),
- the homes of individual elderly Holy Spirit Parish parishioners (raking leaves, shoveling snow and cleaning yards)
- St. Leonard's Retreat Center in Avon
- and the like.

For all of these activities, the Confirmandi will car pool with teachers, co-ordinators and parent volunteers. The purpose of this Form is to advise you of these facts and to solicit your blanket permission for your child to participate in whatever specific events he / she might choose.

Please keep in mind that Holy Spirit Parish has no ability to monitor any element of service activities done outside of the Parish or Parish events. Suggestions of community service may be offered for the convenience of families but are engaged in at one's own risk.

~~~~~  
I hereby give permission for \_\_\_\_\_ to participate in any or all of the Confirmation trips organized by Holy Spirit Parish as explained above. I further agree that the instructions already given via the EMERGENCY MEDICAL AUTHORIZATION Form shall govern any medical emergency which might occur.

In consideration of my child being allowed to participate in these trips, I further release the Diocese of Cleveland, Holy Spirit Parish, its employees and volunteers from all claims, judgments or liability for any injury or damage due to my child's participation in these trips and service projects, including all risks connected therewith whether foreseen or unforeseen. Furthermore, I acknowledge that it is my responsibility to provide adequate health insurance for my child.

I am the Confirmandi's    Mother / Father / Legal Guardian                      (circle one)

\_\_\_\_\_  
Parent / Guardian Signature

\_\_\_\_\_  
Date