

CONSENT TO PARTICIPATE

Youth/Minors 14-18yrs. Of Age Attending the Youth Rally

Dear Parent/Guardian:

Your child is eligible to participate in the Teen Youth Rally at the Eucharistic Rally on July 9th, 2023. Please review, complete, sign, and return this form to the volunteer administrator in charge of the event or program.

CHILD'S INFORMATION:	2. 2. 2. 2. 2. 2. 2. b. 28. 2. 2.	
Participant's name:	Birth Date:	_ Sex: M/F
Home Address:	Current Grade:	_
City: State: <u>UT</u>	Zip Code:	-
PARENT/GUARDIAN INFORMATION:		
Parent/Guardian 1:	Relationship to child:	
Work Phone:	Mobile Phone:	
Parent/Guardian 2:	Relationship to child: _	
Work Phone:	Mobile Phone:	
Parent/Guardian Email 1:	Parent/Guardian Ema	il 2:
EMERGENCY CONTACTS: In the event of an emergency, it following persons(s):	f you are unable to reach a p	parent/guardian, please contact th
Name:	Relationship to child:	
Home Phone:	Mobile Phone:	
Child's Physician:	Phone:	
Child's Dentist:	Phone:	
CONSENT: I hereby consent to participation by my child in the express and unqualified approval for my child's voice/verbal state in diocesan publicity, publications and/or public relations activitis statements, portraits and/or video may be used according to the of the Diocese in perpetuity. No consideration, monetary or other consideration of the diocese in perpetuity.	ements, written statements, es. The use of my child's vo sole discretion of the Dioce	portraits and/or video to appear pice/verbal statements, written
RELEASE OF LIABILITY: As parent and/or legal guardian, the above-named minor. I agree on behalf of myself, my child na harmless and defend the Diocese of Salt Lake City, the Parish/So or representatives associated with the event, from any claim arisin in connection with any illness or injury (including death) or cost compensate the parish/school, its officers, directors and agents, and chaperons, or representative associated with the event for reaction brought against them as a result of such injury or damage, parish/school or the Diocese of Salt Lake City.	med herein, or our heirs, suchool, the officers, directors ag from or in connection who feed medical treatment in contand the Diocese of Salt Lake asonable attorney's fees and	ccessors, and assigns, to hold , employees, agents, chaperones, ith my child attending the event of nection therewith, and I agree to e City, its employees and agents expenses which may incur in any
SPECIFIC MEDICAL INFORMATION		
MEDICAL MATTERS: I hereby warrant that to the best of my responsibility for the health of my child. Details are enumerated Allergic reactions (medications, foods, plants, insects, etc.):	below.	

. ,	last tetanus/diphtheria immunization(s):		
Does child	d have a medically-prescribed diet? \square No \square Y	'es	
Any physic	cal limitations? No Yes		
other ailme	ent?	eactions to new situations, experienced fainting, seizures or any	
	child recently been exposed to contagious disease umps, measles, chicken pox or N1H1? □ No		
	as been marked for any of the above and/or the ld, please explain in detail:	Diocese should be aware of this or any other medical condition(s)	
EMERGE	ENCY MEDICAL TREATMENT: In the eve	nt of an emergency, I hereby give permission to transport my child	
	tal for emergency medical or surgical treatment. I	wish to be advised prior to any further treatment by the hospital o	
directors, a headache, v	agents, chaperones, or representatives associated	mes to the attention of the Parish/School/Diocese, its officers, with the activity that my child becomes ill with symptoms such as at, I understand I will be contacted for counsel on the proper steps	
and actions	s to take. Illitial.		
	CODE OF CONDUC	CT OF PARTICIPANT	
	n signing below, you agree to the following. Yout om activities.	h who fail to live up to these expectations may be excluded	
✓	No possession or use of alcohol drugs tobacc	o or other illegal/objectionable material	
	 ✓ No possession or use of alcohol, drugs, tobacco, or other illegal/objectionable material. ✓ No disruptive behavior, excessive noise, fireworks, lighters, explosives, or weapons of any kind. 		
✓		/events. Tasteless and revealing clothing are forbidden.	
✓	Respect the property of others and the facilities	s. If you break or damage something, you pay for it.	
✓		their parents and are expected to participate during the	
,	entire event/activity. Youth may not leave the	, , ,	
	Report any accidents, incidents, injuries, or illn		
	Respect the rules of the leaders, event and faci	•	
✓	Your behavior should reflect a credit to you, y	our parents and the Diocese of Salt Lake City.	
Youth Sign	nature:	Date:	
The inform	nation provided in this form is correct to the best	of my knowledge. I understand that in signing this document, I	
authorize v liability any	verification of this information through communi- y person or organization which provides such info	cation with any person or organization named herein. I release from ormation as well as the Diocese and the Parish/School. mation, I shall provide the same in writing to the Diocese.	
I agree to o	officially check all/any children attending the You	uth Rally into the event, and to check them out following the e Youth Rally will not be allowed to leave without a parent checking	
D / C			
Parent/Gu	uardian Signature:	Date:	