

St. Mary of the Lakes – Y.E.S.
Senior High Youth Group – 2008-2009 Permission Slip

Event:
Participant's Name: _____ Date of Birth: _____
Home Address: _____

I (Parent/Guardian) _____ give permission for to participate in the above listed activity. I/we assume all risk and hazards incidental to such participation including transportation to and from the activities and I/we do hereby waive, release, absolve, indemnify and agree to hold harmless St. Mary of the Lakes Church, Youth Organizers, Sponsors, Supervisors, Participants and Persons transporting my child to the extent covered by liability insurance. I/we further understand that if insurance to protect against accident or injury is desired for my/our child for accident or injury that could occur during my child's participation in St. Mary's Youth Group activities, I/we agree to furnish said insurance and are aware that St. Mary of the Lakes Church does NOT provide accident or injury insurance for any and all of its activities.

Consent to Treatment of Minor

The undersigned parent/guardian of the aforementioned minor, does hereby authorize adult leaders of the St. Mary of the Lakes Youth Group or staff of the affiliate as agents for the undersigned, to consent to any examinations, X-rays, anesthetic, medical or surgical diagnosis or treatment and hospital care which is deemed advisable by a qualified physician or local hospital. I will assume responsibility for fees incurred by such an emergency.

Allergies (either Medicine or Food): _____
Current Medications: _____

Parent/Guardian Signature: _____ Date: _____
Home Phone #: _____ Cell #: _____

Teen Contract

Since I am a representative of St. Mary of the Lakes Parish Community and a member of Y.E.S., my actions will at times reflect my Christian values.

1. Drugs (and/or paraphernalia) or alcohol are not in my possession and will not be used by me at any time during my participation with Y.E.S.
2. I will refrain from smoking during my participation with Y.E.S.
3. I will respect and cooperate with the adult leaders and follow any rules set up for the event.
4. I will respect and cooperate with my peers. My actions will reflect consideration for the will of the group.

With this signature, I agree that I have read, understood and will follow the above. I understand that if my actions reflect otherwise, my participation in the event will be terminated at my own expense.

Teen Signature: _____ Date: _____

St. Mary of the Lakes Church
Attention: Jill Snyder
40 Jackson Road - Medford, NJ 08055
(609) 654-8208 (x111) or jsnyder@smlparish.org