

Holy Trinity Parish

Activities Authorization Slip

(Please turn in this entire page. Do not tear this legal document in half)

We welcome your child's participation in our activities, but before your child can participate, we ask that you review and sign this form, and agree to the conditions described below. Please, sign and return this form

Location and Purpose of Activity: _____

Date and Time of Activity _____

Designated Supervisors: Nancy Luensmann

Method of Transportation: _____

Release and Indemnification

As parent or legal guardian of _____ (Name of minor) I hereby give my permission for this minor to participate in the above activities and accept the following conditions for participation:

I understand and acknowledge that participation in the activities involves some risk of injury to the minor, including risks associated with transportation with cars or buses. I agree to repay the Parish, its Employees, Volunteers and the Archdiocese of Denver for any expense or fees incurred in any lawsuit arising as a result of any damage or injuries caused by my child as a result of his/her participation in the activity.

I accept full responsibility for any medical expense incurred as a result of any sickness or injury to my child and understand that the Parish and the Archdiocese of Denver do not maintain medical insurance which would cover any sickness or injury to my child. I also understand that the Parish and the Designated Supervisor(s) will act with all possible prudence and care.

I authorize the Designated Supervisor(s) of these activities to authorize and consent to any medical care for my child that is believed to be reasonably necessary, including hospitalization or surgery. The Parish will attempt to obtain the consent of a parent or legal guardian by phone when time and conditions permit.

Date: _____ Signature of Parent or Legal Guardian _____

Phone # in case of emergency _____ Alternate phone _____

Minor's name (please Print) _____ **AGE** _____

Street: _____, City _____, State _____ Zip _____

Home Phone _____ Grade _____ e-mail address _____