



ST. JUDE PARISH
 590 POPLAR STREET
 ELYRIA, OHIO 44035-3999
 PHONE 440-366-5711



ST. MARY PARISH
 Our Lady of the Assumption
 320 MIDDLE AVENUE
 ELYRIA, OHIO 44035
 PHONE 440-323-5539



**PERMISSION FORM
 RELEASE, INDEMNIFICATION & WAIVER OF LIABILITY**

I, _____, am the _____
 (Name of Parent/Guardian) (Father, Mother, Custodial Parent, Legal Guardian)
 of _____.
 (Name of Youth Participant)

I hereby grant permission for the above named child to attend _____
 (Description/Destination of Event)

on _____ from _____ to _____ and I consent to the
 (Date of Event) (Time) (Time)
 child's participation in such an event.

I understand that all activities have certain risks and could result in injury to the above child. In consideration of the above child being permitted to participate in the above event, on behalf of the child, and on behalf of the mother, father, next of kin and (if applicable) the guardian of the above child, I hereby assume all risk of injury which may be sustained by the child in connection with the above event. I further specifically waive, release and discharge the Diocese of Cleveland, St. Jude Parish, St. Mary Parish and the employees and volunteers of the aforesaid parish and/or diocese from all claims arising out of and/or resulting from harm, bodily injury, loss of life or property, damages and losses sustained by the child while participating in the above event, including claims of the child's parents and/or next of kin and/or (if applicable) guardian.

I further agree to indemnify the Diocese of Cleveland, St. Jude Parish, St. Mary Parish, and the employees/volunteers of the aforesaid parish, parish Diocese and/or their employees/volunteers as a result of injury or damage suffered by the above child and/or the child's parents and/or next of kin and/or (if applicable) guardian, arising out of the child's participation in the event. Furthermore, I acknowledge that it is my responsibility to provide adequate health insurance for the above child.

I fully understand what is involved in the event and I understand that I have the opportunity to call Randy Kula, Coordinator of High School Youth Ministry @ (216) 409-2639 and ask him about the event.

I have read and fully understand the contents of this entire document and consent to the provisions contained therein.

 (Parent/Guardian signature) or (Participant if 18 or older) (Phone) (Date)