



LIFE TEEN SERVICE LOCK-IN

Summer Mission Trip at St. Joseph's

June 14-16, 2018

Begins Thursday @ 9:00 am & Ends Saturday @ 6:00 pm
On & Off-campus Service during the day, evening retreat and FUN

Have a summer commitment? Come join us before or after!

Liability Waiver

As parent/guardian (s) of _____, I hereby consent and agree to hold harmless St. Joseph Catholic Church, Lebanon, Indiana and the Diocese of Lafayette-in-Indiana, Inc., and any and all employees or volunteers thereof, for any accident, injury or occurrence arising out of, or in connection with the activity and our child ('s) event arranged transportation necessary to participate in the aforementioned activity. We understand that our child/ren will be assigned to ride with a licensed adult driver, driving a privately-owned automobile, or school bus and that this assignment will be made by the aforementioned teacher/faculty advisor.

I give permission for my child, in case of emergency, to be taken to a physician or hospital by an adult volunteer. I understand that every effort will be made to contact me. If I cannot be reached, I hereby give permission to the physician selected by the adult volunteer to secure proper treatment for my child.

My child may be given: _____ non-prescription medication (i.e. Tylenol, cough drops)
(please check one) _____ no medication unless emergency treatment is required

Insurance Policy Name: _____ Number: _____

Allergies & Medications: _____

Alternate phone numbers: _____

Date/Signature of parent/guardian (s)

Phone

If parent can't be reached in the event of an emergency during the lock-in, please contact: _____ Phone _____