

Our Lady Queen of Angels Catholic Church, Opelousas, LA

Teens United in Christ

LIABILITY RELEASE FORM

This form is binding only on Saturday November 13th, 2004 from 8am to 5pm.

+++IMPORTANT+++

The Youth Group Leader is responsible to have a completed liability release form for each participant.

If you are an individual registration, please fill out this form, mail or bring it in with your registration fee.

Registration limited to availability!

Early registration \$10.00 if received by noon on Fri. Nov. 12th, 2004. Late registration \$12.00 'at the door' Nov.13th from 8:00am-8:50am.

Participant's Full Name: _____ Church Parish _____

Birth Date: _____ Grade: _____

Home Address: _____ City: _____ St: _____ Zip: _____

Home Phone: _____ E-Mail: _____

The undersigned do hereby release forever, discharge, and agree to hold the Diocese of Lafayette and/or Our Lady Queen of Angels Catholic Church, harmless from and against any and all liability, claims, demands, lawsuits and expenses arising from personal injury, sickness, death, or property damage of any nature whatsoever which may be incurred or suffered by the undersigned and or the participant (if participant is under 18, or 18 and older) while attending the above activity. Furthermore, the undersigned hereby assume all risk of personal injury, sickness, death, damage and expense arising from the undersigned's or participant's (if participant is under 18, or 18 and older) participation in all activities, including recreation and work activities involved in the above activity. In addition, authorization and permission is hereby given to furnish all necessary transportation, food, and lodging for the undersigned or participant (if participant is under 18, or 18 and older).

The undersigned further hereby agree to indemnify and hold the Diocese of Lafayette, Our Lady Queen of Angels Catholic Church and their respective members, directors, employees, agents, and all other volunteers, or volunteer service organizations (collectively, the "Indemnities"), harmless from and against any and all claims, demands, actions, lawsuits and liabilities, including attorneys' fees and expenses sustained by the indemnities as the result of the negligent, willful, or intentional acts of the undersigned and/or participant (if participant is under 18, or 18 and older).

If participant is under 18 years of age: We (I) are the parents(s) or legal guardian(s) of the participant, hereby grant permission for (Legal name of the participant) _____ to participate fully in the above activity and all of its undertakings, and hereby give our permission to take said participant to doctor or hospital and hereby authorize medical treatment, including, but not limited to, emergency surgery, and we, fully and completely, assume responsibility for all medical bills. Furthermore, should it be necessary for the participant to return home due to medical reasons, disciplinary action, or otherwise, I (we) assume all responsibility and transportation costs. (This form must be signed by all participants under 18 and all participants 18 or older.) If participant is under 18, parent (or custodial parent), or legal guardian must sign.

Father/Mother/Legal Guardian signature (circle one): _____ Date _____

Participant's Signature: _____ Date: _____

Name of Family Physician: _____ Phone:(____) _____

Allergies: _____

Current Medications: _____

Medical History: _____

In case of an emergency, please contact:

Name: _____

Physical Address: _____ Mailing Address (if different) _____

Saturday phone: _____ cell phone: _____ other: _____

Complete this form and mail it in with your registration fee to :

Teens United in Christ
Attn:Adrion Guidry
Our Lady Queen of Angels
P.O.Box 508
Opelousas, LA 70571-0508

For more information, contact:

Adrion Guidry- Youth Director
Office - (337) 942-5483
Fax - (337) 942 - 9708
Email - younitedteens@charter.net
Web - queenofangelschurch.org Click on *Teen Ministry*

