

# Parent Permission Form for Event Participation

Dear Parent or Legal Guardian:

Your child will be participating in a catechetical or youth ministry sponsored activity requiring transportation to a location away from parish premises. This activity will take place under the guidance and supervision of employees and volunteers from St. Fabian Parish.

**Event: 3 Cedars Corn Maze - 10/8/21**

**Includes: CornMaze HayRide BonFire Cider/Donuts**

**Time: 7-9pm**

**Student Cost: \$15**

**Text Paul 734.634.8444 to RSVP**

----- Retain upper portion for your information-----

Statement of Consent

I hereby consent to participation by my child, \_\_\_\_\_, in the event described above scheduled for 10/8/21.

I understand that this event will take place away from the parish grounds. I further consent to the conditions stated above on participation in this event.

In consideration of my child being allowed to participate in this event, I agree to indemnify and hold harmless St. Aidan Parish, any and all affiliated organizations, its/their employees, agents, representatives, volunteers and drivers, from all claims I or my child may have, excluding claims for intentional misconduct or gross negligence, arising from or relating to my child's participation in this event.

I authorize St. Fabian Parish to obtain necessary medical treatment for my child in case of illness, injury or accident. My child had the following medical conditions or allergies about which a health care provider should be told: \_\_\_\_\_

During this event I can be reached at ( \_\_\_\_\_ ) \_\_\_\_\_

\_\_\_\_\_  
Print Parent's Name \_\_\_\_\_

\_\_\_\_\_  
Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_