MINOR PILGRIMAGE RELEASE OF LIABILITY

Minor Participant's Name:	
Date of Birth: Sex:	
Parent/Guardian's name:	
Home address:	
Home phone: Mobile phone:	
I,, grant permission for my child,	
(Parent or guardian's name) (C	Child's name)
to participate in the pilgrimage event that requires transportation to a location away from will accompany my child on this trip and will remain responsible for the care of my min pant").	•
A brief description of the activity follows:	
Type of event: 2-day pilgrimage to Wisconsin Shrines	
Dates of event: Wednesday, June 25 & Thursday, June 26, 2025	
Destination of event: Our Lady of Champion, New Franken, WI and Ho	ly Hill, Hubertus, WI
Estimated time of departure: Wednesday, June 25, 2025, 6:00 AM	
Estimated time of return: Thursday, June 26, 2025, 8:30 PM	
Mode of transportation to and from event: Trailways Motorcoach	
As parent and/or legal guardian, I remain legally responsible for any personal actions tak minor ("Minor participant").	en by the above-named
I agree on behalf of myself, my child named herein, or our heirs, successors, and assigns,	to hold harmless and
defend St. Pius X Catholic Church, The Catholic Daughters of the Americas, CDA Court	_
officers, directors, agents, employees, or representatives associated with the pilgrimage fi	, ,
or in connection with my child attending the event or in connection with any illness or in	
cost of medical treatment in connection therewith, and I agree to compensate the parish, of Americas, CDA Court Cedar Rapids #1768, its officers, directors, agents, employees, or	-
with the event for reasonable attorney's fees and expenses which may incur in any action	•
result of such injury or damage, unless such claim arises from the negligence of the paris	
Rapids #1768.	
Signature: Date:	