



Everyone needs to fill out this form
However if you are under 18 years of age it MUST have
parent's signature

Participant Registration Form - Youth and Adults

Parish Name: _____ City: _____ Attending as Individual with Group
Participant Name _____ Male/Female Circle: Adult or Youth Age: _____
Address _____ Email: _____
City, Zip _____ Phone _____
Parent/Guardian Name _____ Phone/Cell(s) _____
Alternate Emergency Contact Name and Number: _____

Medical Release: To the best of my knowledge my child is in good health, and I assume all responsibility for the health of my child. In the event of an emergency, I give permission to transport my child to a hospital for emergency treatment. I wish to be advised prior to any further treatment by the hospital or doctor. In the event you are unable to reach me contact the alternate adult listed on this form.

Parent/Guardian Signature: _____

All youth attending as individuals please include a photocopy of your insurance card (front and back)

STATEMENT OF COMMITMENT: I will not bring or purchase any alcoholic beverages, tobacco products, fireworks, projectile weapons or unauthorized drugs to this event. I also agree to follow the rules as given by the adults and chaperones. I understand that if any of these items are found in my possession or if my behavior is inappropriate, my parent/guardian will be notified to pick me up immediately.

Student's Signature _____

Permission: I, _____ grant permission for my child, _____ to participate in this Youth Rally. This activity will take place under the guidance and direction of the Youth Office employees and volunteers from the Catholic Center for Charismatic Renewal. I also understand that the photos taken may be displayed at other events and on the Youth Staying Connected web site. I have read, understood and agree with these conditions.

Liability Release: I agree on behalf of myself, my child named herein, or our heirs successors, and assigns, to hold harmless and defend the Catholic Center for Charismatic Renewal, its officers, directors and agents, and the Archdiocese of San Antonio, chaperones, arising from or in connection with my child attending the event or in connection with any illness or injury or cost of medical treatment in connection therewith, and I agree to compensate the parish, its officers, directors and agents, and the Archdiocese of San Antonio, chaperones, or representatives associated with the event, for reasonable attorney's fees and expenses arising in connection therewith.

As a parent /guardian, I remain legally responsible for any personal actions taken by the above named minor ("participant).

Parent/Guardian Signature: _____