

ADULT FORM G

**DIOCESE OF COVINGTON  
CONSENT FORM AND LIABILITY WAIVER**

Participant's Name \_\_\_\_\_ Birth Date \_\_\_\_\_  
Sex \_\_\_\_\_ Home Address \_\_\_\_\_  
Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_

I agree on behalf of myself, my heirs, successors, and assigns, to hold harmless and defend (name of parish) \_\_\_\_\_, its officers, directors and agents, and the Diocese of Covington, chaperons, or representatives associated with the activity as described herein for any claim or damages to any person or property, arising from or in connection with my attendance at the activity 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 Diocese of Covington, chaperons, or representative associated with the activity for reasonable attorney's fees and expenses arising in connection therewith.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**ACTIVITY INFORMATION**

Activity: NCYC Date: Nov. 16 – 19, 2017  
Location Indianapolis, IN Phone (emergency) \_\_\_\_\_  
Starting Time: Thurs. Nov. 16, 2017 AM Meeting Place: \_\_\_\_\_  
Ending Time Sat. Nov. 19, 2017 AM Meeting Place: \_\_\_\_\_  
Type of Transportation: Bus  
Contact Person: Isaak A. Isaak Phone 859 392-1500 –x-1529  
Other Information \_\_\_\_\_

**FORM C**

**PARENTAL CONSENT AND WAIVER OF LIABILITY**

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Parent/Guardian's name \_\_\_\_\_  
Home Address \_\_\_\_\_  
Home telephone \_\_\_\_\_ Business telephone \_\_\_\_\_

I, \_\_\_\_\_, grant permission for my child \_\_\_\_\_, to participate in the Diocesan/parish/school event described below which requires transportation away from the parish/school. I understand that this activity will take place under the guidance and direction of diocesan/parish/school employees and/or volunteers (hereinafter "chaperones").

**DATE AND TIME:** PM on Nov. 16, 2017 returning early AM on Nov. 19, 2017  
**TYPE OF EVENT:** National Catholic Youth Conference  
**DESTINATION:** Indianapolis, IN  
**MODE OF TRANSPORTATION:** Executive Charter, Inc. Buses

In consideration of my child's participation in this event, on behalf of myself, my child, and our heirs, assigns, executors and personal representatives, I release, hold harmless and discharge forever the Diocese of Covington and \_\_\_\_\_, their respective officers, directors, employees, agents and chaperones from  
(Name of parish or school)  
any and all liability, claims, losses, damages, costs or expenses and waive any such claims against any such person or organization arising directly or indirectly from or attributable in any legal way to any action, omission or any other act of any such person or organization in connection with my child's participation in this event. As parent and/or legal guardian, I remain legally responsible for any personal actions taken by my child. I agree on behalf of myself, my child, and our heirs, assigns, executors and personal representatives, to hold harmless  
And defend the Diocese of Covington and \_\_\_\_\_, their respective officers, directors, employees,  
(Name of parish/school)  
agents, and chaperones from any claim or damages to any person or property, arising from or on connection with my child's participation in this event or in connection with any illness or injury or the cost of medical treatment of my child, and I agree to compensate the Diocese of Covington, and \_\_\_\_\_,  
(Name of parish/school)  
their respective officers, directors, employees, agents and chaperones for reasonable attorney's fees and expenses arising in connection therewith. I agree that my child will cooperate with the chaperones and that the Diocese of Covington and \_\_\_\_\_ will not be liable if my child fails to obey the chaperones and that  
(Name or parish or school)  
infractions may result in termination of my child's participation. In such event, I further agree to be financially responsible for any costs in other required expenses necessary to transport my child home.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_  
Child's Signature \_\_\_\_\_ Date \_\_\_\_\_