

# St. Victoria Parish Family Permission Form

Name \_\_\_\_\_ Male/Female \_\_\_\_ Grade \_\_\_\_ DOB \_\_\_\_\_

Parent/Guardian \_\_\_\_\_

Address \_\_\_\_\_

City/Zip \_\_\_\_\_ Home Phone \_\_\_\_\_

Other Phone \_\_\_\_\_

Parent email \_\_\_\_\_

I am willing to chaperone: (name) \_\_\_\_\_

## MN Wild Hockey Game

Date of Event: **Thursday, April 11** Type of Event: **NHL Game** Participant Cost: **\$40 (Due w/ form by April 8)**

Destination: **Xcel Energy Center** \*Open to all youth in grades 6-12!

Arrival Time: **5:45 p.m, St. Victoria** Pick-up Time: **10:00 p.m, St. Victoria**

Individual(s) in Charge: **Sara Svenby (Assistant Director of Faith Formation, St. Victoria)**

Mode of Transportation to/from event: **Bus**

Emergency Contact #1 \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Emergency Contact #2 \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

**\*If parents cannot be reached at above numbers.**

### **AUTHORIZATION MUST BE SIGNED BY BOTH THE PARENT/GUARDIAN AND THE YOUTH!!**

My son/daughter has permission to participate in the St. Victoria MN Wild hockey game event. I understand such an event does involve some element of risk incidental to such participation, and I do release and hold harmless the Archdiocese of St. Paul/Minneapolis, St. Hubert Catholic Community, their employees, chaperones, leaders, or drivers except for their negligence. Neither the Archdiocese, St. Hubert Catholic Community, nor any said persons shall be held financially responsible for any injury, illness, or death incurred as a direct or indirect result of this activity. In the event of an emergency, I hereby authorize emergency treatment to be administered.

I also understand that if my son/daughter exhibits behaviors outside the guidelines set by the leaders that appropriate disciplinary action will be taken. Including and up to me being called and required to pick up my son/daughter early from this event.

I authorize and consent that St. Victoria be permitted to use and publish for advertising, commercial or public purposes the likeness of my son/daughter for any lawful purpose whatsoever, including electronic media and internet websites. I understand that my child's name will not be used in connection with the picture. I hereby release St. Victoria Parish Family from any liability in connection with such use.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

I will respect the property of all facilities involved, will not intentionally harm (physically or emotionally) other participants and leaders, and follow all rules of the event and directions given to me by leaders and chaperones.

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