

**Parental Consent and Liability Waiver**  
**St Elizabeth Ann Seton Church**

**WHO:** 7-11<sup>th</sup> grade students (all youth should plan to attend since there are no faith formation classes at the parish that evening)

**WHERE:** Living Stations at Church of St Paul, Ham Lake MN

**WHAT:** Attend "Living Stations" that starts at 7:00pm

**WHEN:** Wed, Mar 9, 2016

**TIME:** 6:00pm-9:00pm

**COST:** None

**DUE:** Permission slip due Mar 9, 2016

(Drop at parish office or put in collection basket)

**CHAPERONES:** Ten adult volunteers from St Elizabeth Ann Seton Church

**\*\*Bus will depart St Elizabeth Ann Seton Church at 6:00 pm SHARP! and return at approximately 9:00pm.**

**\*\*\*No permission slip-no boarding the bus!\*\*\***

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Child's Name\_\_\_\_\_

Please Print

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

Please Print

Home Phone\_\_\_\_\_ Cell Phone\_\_\_\_\_

Emergency Contact\_\_\_\_\_ Phone #\_\_\_\_\_

Insurance Carrier\_\_\_\_\_ Policy #\_\_\_\_\_

I grant permission for my child, \_\_\_\_\_ to participate in activities that may require leaving the church/religious education premises and may require transportation to a location away from the church/religious education site. I will hold harmless and defend staff members and volunteers from St Elizabeth Ann Seton Church from any claims or lawsuits arising from, or in conjunction with any illness or injury, or cost of medical treatment in connection therewith. I will assume liability for the health and well-being of my child/ren.

In the event of an emergency I hereby give permission to transport my child to a hospital for emergency medical or surgical treatment. I wish to be advised prior to any treatments by the hospital or doctor.

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

Date\_\_\_\_\_

LIVING STATIONS Mar 9, 2016