

Parent Permission Form for Vacation Bible School - SCUBA

Dear Parent or Legal Guardian:

Your student is eligible to participate in an All Saints Parish activity taking place at St. Anne Church of All Saints Parish. This activity will take place under the guidance and supervision of the Sisters of Our Mother of Divine Grace and All Saints Parish Catechetical Leader, staff and volunteers. A brief description of the activity follows:

Event: Vacation Bible School - Scuba

Destination: St. Anne Church of All Saints Parish, 817 Sable St., Alpena, MI

Activity Supervisors: Sisters of Our Mother of Divine Grace and Catechetical Leader

Date: Monday, July 29– Wednesday, July 31, 2024

Time: Registration each day starting at 8:45am, VBS starts at 9am with Mass and runs until 12pm. (Students may be picked up at 12pm or stay for lunch with pick up at 12:45pm)

Parents/guardians are encouraged to attend Mass at 9am with their students.

Method of Transportation: Parents/guardian drop off and pick up

Cost: \$0

If you would like your student to participate in this event, please complete, sign, and return the following statement of consent and release of liability. As parent or legal guardian, you remain fully responsible for the actions and conduct of your youth.

Statement of Consent

I hereby consent to participation by my child, _____, age ____ grade ____ in the event described above. I understand that this event will take place at St. Anne Church of All Saints Parish and that my child will be under supervision of the designated parish volunteers on the stated date. I further consent to the conditions stated above on participation in this event, including the method of transportation.

In consideration of my child being allowed to participate in this event, I agree to indemnify and hold harmless **All Saints Parish**; the Diocese of Gaylord, and any and all affiliated organizations, their employees, agents and representatives, including volunteer and other drivers, from any and all claims, including negligence, arising from or relating to my child's participation in this event. This indemnification and hold harmless agreement does not apply to claims for intentional misconduct or gross negligence.

(Print Parent's Name)

(Parent's Signature)

(Date)

Phone number you can be reached at during the event: _____

Media/Promotions Release: I give permission for All Saints Parish and the Diocese of Gaylord to use pictures taken at this event for promotional purposes. No names will be used with these pictures. It is my understanding that my signature releases the Diocese of Gaylord and All Saints Parish from any financial or legal responsibility for the use of this media relations/promotional materials.

Parent or Guardian signature: _____ **Date:** _____

Please turn paperwork into the parish office. No student is allowed without paperwork.
If you have any questions, call Jackie Benson 989-354-3019.