

**ST. DOMINIC CYO, NEW ORLEANS, LOUISIANA
PARENTAL/GUARDIAN CONSENT FORM AND LIABILITY WAIVER**

Participant's name: _____

Birth date: _____ Sex: _____

Parent/Guardian's name: _____

Home address: _____

Student's cell phone: _____ Home phone: _____

Mother cell phone: _____ Father cell phone: _____

I, _____, grant permission for my child, _____, to participate in this parish activity that may require transportation to a location away from the parish site. This activity will take place under the guidance and direction of parish employees and/or volunteers from St. Dominic Parish. A brief description of the activity follows:

Type of event: Catholic Charities Food for Seniors Service Project

Location(s): Catholic Charities warehouse

Individual in charge: John Smestad, Jr.

Duration of activity: 8:15 AM – 1:00 PM on December 3, 2022

Mode of transportation to and from event: school bus

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

I agree on behalf of myself, my child named herein, and my spouse, our heirs, successors, and assigns, to indemnify, hold harmless, and defend St. Dominic Catholic Church and The Roman Catholic Church of the Archdiocese of New Orleans, their members, directors, officers, employees, agents and representatives associated with the event arising from or in connection with the negligence and/or intentional acts of my child.

Signature: _____ Date: _____



CONSENT FOR MINOR AND LIABILITY WAIVER

Consent for Minor

I grant permission for my child to participate in a volunteer activity with Catholic Charities Archdiocese of New Orleans and The Roman Catholic Church of the Archdiocese of New Orleans (hereafter referred to as Agency). This activity will take place under the guidance and direction of employees from the Agency and/or volunteers and/or the group leaders and chaperones. For organized youth and student groups an appropriate number of chaperones are required to ensure the safety of my child and productivity at Agency sites. These arrangements are made with the teacher or group coordinator. All volunteers will be required to follow volunteer safety guidelines at the Agency. All volunteers, including youth, are responsible for their own transportation to and from Agency volunteer activities. All volunteers are required to wear closed toe shoes and activity appropriate attire. Volunteers agree to refrain from excessive cell phone usage while they are volunteering. As parent and/or legal guardian, I remain legally responsible for any personal actions taken by my child.

Liability Waiver

I agree on behalf of myself, my child, my heirs, successors, and assigns, to hold harmless the Agency, its board of directors, employees, volunteers, chaperones, or representatives associated with the volunteer activity, arising from or in connection with my Volunteer Services Program or in connection with any illness or injury or cost of medical treatment in connection therewith, and I agree to compensate the Agency, its board of directors, employees, volunteers, chaperones, or representatives associated with the activity for reasonable attorney's fees and expenses arising in connection therewith. **Volunteer ACKNOWLEDGES AND AGREES THAT IT IS AGREEING TO DEFEND, INDEMNIFY AND HOLD HARMLESS CATHOLIC CHARITIES – ARCHDIOCESE OF NEW ORLEANS AND THE ROMAN CATHOLIC CHURCH OF THE ARCHDIOCESE OF NEW ORLEANS FOR THEIR NEGLIGENCE OR FAULT, INCLUDING PROPERTY DEFECTS**

Media Release

I consent to the unrestricted use, by the Agency (and those acting with its permission and authority), of any and all photographs taken or statements given, in whole or in part, unlimited use, for all purposes in any form or medium, including, without limitation, its use through or on any electronic media, including the internet. I waive any rights to inspect or approve the finished product or products or the advertising copy or printed matter that may be used with the finished photograph(s) and/or statement(s). Further, I relinquish all rights, titles and interests I may have in the finished photograph(s), negative(s), statement(s) and reproduction to any responsible business firm or publication. It is understood that the Agency retains copyright of images at all times under the express understanding and agreement that the Agency shall have exclusive reproduction rights to the images and/or statements. I hereby release the Agency from any and all claims in connection with the photograph(s) and/or statement(s), including any and all claims of libel.

Minor's Name Printed

Minor's Date of Birth

Parent/Guardian's Name Printed

Parent/Guardian's Signature

Date of Signature

Expiration Date (FOR OFFICE USE ONLY)