

When: Saturday, February 1, 2025 COST: \$25 PAID _____

Where: Cathedral of the Sacred Heart, 414 W. 11th St.

Time: Registration Begins at 8:30am

Event: Retreat from 9:00am until 3:00pm

Individual in charge of your group: Name leader from your parish and list your own home parish in all fields listed (except where Cathedral is listed).

Name of Event: _____

Participant's Name: _____ Date of Birth: _____ Male Female

Parent/Guardian's Name: _____

Home Address: _____ City: _____ ST: CO ZIP: _____

Home/Cell Ph: _____ Emergency Contact: _____ Emergency Ph: _____

I, _____ grant permission for my child _____

Parent or Guardian Name

Child's Name

to participate in this parish/school event that requires transportation to a location away from the parish/school site. This activity will take place under the guidance and direction of parish/school employees and/or volunteers from _____.

Name of parish/school

A brief description of the activity follows:

Type of event: _____

Date(s) of event: _____ Destination of Event: _____

Individual in charge: _____

Estimated time of departure and return: _____

Mode of transportation to and from event: _____

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, or our heirs, successors, and assigns, to hold harmless and defend _____, it's officers, directors, employees, and agents and the

Name of Parish/School

Diocese of Pueblo, its employees and agents, chaperones, or representatives associated with the event, from any claim arising from or in connection with my child attending the event or in connection with any illness or injury (including death) or cost of medical treatment in connection therewith and I agree to compensate the parish/school, its officers, directors and agents, and the **Diocese of Pueblo** its employees and agents and chaperones, or representative associated with the event for reasonable attorney's fees and expenses which may incur in any action brought against them as a result of such injury or damage, unless such claim arises from the negligence of the parish/school or the **Diocese of Pueblo**.

Signature: _____ Date: _____

(over)



PHOTOGRAPH AND VIDEO CONSENT FORM

From time to time, pictures and videos may be taken of your ministry events and gatherings. We would like to be able to use the photographs and videos for flyers, parish and diocesan publications, and the ministry website. Written consent of both the student and parent/guardian is required. Names will not be posted unless written authorization is given by the student and parent/guardian, and then only first names will be used. If there are concerns about pictures or videos posted on the website, please contact the ministry coordinator or webmaster, and they will promptly be removed.

I / We, the parent(s) / guardian(s) of this youth (*name*) _____, authorize and give full consent, without limitation or reservation to (*parish/school*) _____, to publish any photograph or video in which the above named student appears while participating in any program associated with (*parish/school*) _____ ministry. There will be no compensation for use of any photograph or video at the time of publication or in the future.

Student Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____