DIOCESE OF OWENSBORO ACTIVITY INFORMATION FORM

Parish/School/Institution _____ Date _____

Dear Parent or Legal Guardian:
Your child is eligible to participate in a parish/school/diocesan-sponsored youth activity requiring transportation, under the guidance and supervision of employees and/or volunteers. A brief description of the activity follows:

Destination _____

Educational Objective (for School) or Other Purpose _____

Planned Activities _____

Lead Supervisor of the Event _____

Date, Time, and Location of Departure _____

Participants may not be dropped off before _____

Anticipated Time and Location of Return _____

****Participants may not be left unattended upon return <u>so be on time please!</u>****

Method of Transportation _____
(If personal vehicles are used, volunteer drivers will complete Form E.)
Accommodations (if applicable) _____
Total Cost _____ Other Details: _____

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Please return this bottom portion to the designated supervisor of the event: _____

Name and Date of Activity _____

Name of Participant _____

Parent/Guardian Phone (Home) _____ **Phone (Work/Cell)** _____

In an emergency someone other than parent/guardian
Emergency Contact Available during Event (Other than Parent/Guardian):

Name: _____ Phone (Home) _____

Phone (Work) _____ Phone (Other) _____

X _____
Parent/Guardian Signature Date
**In signing this, parent/guardian is agreeing to pick up participant on time.

(**OVER**)

LIABILITY RELEASE--PARENT/GUARDIAN COPY

I/We, the parent(s) and/or legal guardian(s) of _____ (child's name), hereby request permission for this child to participate in any and all of the activities of the Roman Catholic Diocese of Owensboro and _____ (name of organization) I/We release from responsibility any person transporting my/our child to or from activities. I/We understand the possibility of unforeseen hazards and know the inherent possibility of risk. Taking into account the subject's age, I/we believe that the subject of this release is physically and mentally capable of taking reasonable precautions to protect his/her own safety and has the maturity and judgment not to put himself/herself or others in dangerous situations.

(This top portion is to be kept by the parent or guardian so they have all relevant information about the activity.)

Parent/guardian Signature _____ Date _____
Adult witness to Signature _____ Date _____
Received by _____ Date _____
(Signature of DRE, CRE, Teacher/School Personnel, Youth Representative, etc.)

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LIABILITY RELEASE--PARISH/SCHOOL/DIOCESAN COPY

I/We, the parent(s) and/or legal guardian(s) of _____ (child's name), hereby request permission for this child to participate in any and all of the activities of the Roman Catholic Diocese of Owensboro and _____ (name of organization) I/We release from responsibility any person transporting my/our child to or from activities. I/We understand the possibility of unforeseen hazards and know the inherent possibility of risk. Taking into account the subject's age, I/we believe that the subject of this release is physically and mentally capable of taking reasonable precautions to protect his/her own safety and has the maturity and judgment not to put himself/herself or others in dangerous situations.

Parent/guardian Signature _____ Date _____

Adult witness to Signature _____Date _____

Received by _____ Date _____
(Signature of DRE, CRE, Teacher/School Personnel, Youth Representative, etc.)