

**DIOCESE OF OWENSBORO
ACTIVITY INFORMATION FORM**

Parish/School/Institution Diocese of Owensboro Catholic Committee on Scouting Date 4/21/17

Dear Parent or Legal Guardian:

Your child is eligible to participate in a parish/school/diocesan-sponsored youth activity requiring transportation. This activity will take place under the guidance and supervision of employees and/or volunteers from

Diocese of Owensboro parish/school/diocese. A brief description of the activity follows:

Destination Land Between the Lakes, Energy Lake Campground

Educational Objective Build community, connect faith with an appreciation of nature

Planned Activities Crafts, fishing, hiking, prayer, Mass

Designated Supervisor of the Event Fr. Ken Mikulcik

Date, Time, and Location of Departure 9/22/17 Arrive at Campsite after 6 PM

Participants may not be dropped off before 6 PM

Anticipated Time and Location of Return 9/24/17 Depart at 10:30 AM

****Participants may not be left unattended upon return so be on time please!****

Method of Transportation Carpool to other parts of the Land Between the Lakes

(If personal vehicles are used, volunteer drivers will complete Form E.)

Accommodations (if applicable) Tent Camping

Total Cost \$35 Other Details: Bring tent, sleeping bag, water bottle, flashlight, fishing pole, Bible

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Please return this bottom portion to the designated supervisor of the event: Fr. Ken Mikulcik

Name and Date of Activity Faith and Fellowship Weekend November 11-13, 2016

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)

Revised October 2012

PARENT/GUARDIAN COPY
LIABILITY RELEASE

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.)

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