



# Diocese of Great Falls-Billings

## Events, Travel, and Permission Policy

### Parental/Guardian Consent Form

Youth/Participant:	
Birth Date:	Sex:
Parent/Guardian Name:	
Home Address:	City/Zip:
Home Phone:	Alternate Phone:
<p>I, _____ (parent/guardian name) grant permission for my child, _____ (youth name) to participate in this event, which may or may not require travel away from the parish/school site. This activity will take place under the guidance and direction of the employees and/or volunteers of the parish, school, or the Diocese of Great Falls-Billings.</p>	
Type of event: <i>Senior Retreat</i>	Date of event: <i>5/22 - 5/24 2022</i>
Location of event: <i>St. Thomas Camp - Monarch</i>	Cost of event: <i>N/A</i>
Individual in charge of group: <i>Shel Hansen</i>	
Estimated time of departure: <i>5/22 1:30 pm</i>	Estimated time of return: <i>5/24 1:30 pm</i>
Mode of transportation to and from event (if necessary): <i>Sarge Transportation</i>	
<p>As a parent and/or legal guardian, I remain legally responsible for any personal actions taken by the above-named minor ("participant").</p> <p>I agree on behalf of myself, my child named herein, or our heirs, successors, and assigns, to hold harmless and defend all Catholic Parishes and Catholic Schools of the Diocese of Great Falls-Billings, their officers, directors, employees and agents, and the Diocese of Great Falls-Billings 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 Great Falls-Billings, its employees and agents and chaperones, or representatives 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 Great Falls-Billings.</p>	
Signature:	Date: