



**Field Trip Participant and Parent/Guardian Information, Liability Waiver, and
Photograph and/or Videotape Consent Form-Local Event-Not Overnight**

For youth under 18 years of age, Parent/Guardian must complete and sign the form. For a high school student age 18 or older, the student completes the form – and the student’s Parent/Guardian must co- sign along with the student. This form consists of three (3) parts; each one must be completed and Parts II & III must be signed.

Part I: Participant and Parent/Guardian Information

Participant’s Name: _____ Date of Birth: _____

Address: _____ City/State/Zip: _____

Cell Phone: _____ Male Female (circle one) E-mail: _____

Parish/School/Group: _____

Parent/Guardian’s Name: _____ Cell Phone: _____

E-mail: _____ Other Phone: _____

Parent/Guardian’s Name: _____ Cell Phone: _____

E-mail: _____ Other Phone: _____

Emergency Contact Name: _____ Phone: _____
(Not the parent)

Part II: Consent & Liability Waiver

As parent or guardian of my son/daughter, I do hereby agree to allow my son/daughter to participate in Steve Angrisano High School Retreat on Saturday, November 17, 2018 from 900 am – 12:30 pm at Saint Andrew Parish Social Hall (the “Event”). I hereby freely and voluntarily consent to participation in the Event described above. I, the undersigned, in the Event described above, do waive and release Saint Andrew Catholic Church (High School, Parish or Group), the Archdiocese of Miami, Inc., and all of their corporate members, affiliated entities, employees, officers, directors, and agents (“Sponsors”) from liability for any injury, accident, or damages caused by any vehicle, weather, sickness, or otherwise stemming from any act or omission of any individual. I also release Sponsors and agree to indemnify them with regard to any financial obligations incurred by the acts or omissions of my son/daughter.

Parent/Guardian Signature: _____ Date _____

Parent/Guardian Signature: _____ Date _____

Parent/Guardian Signature: _____ Date _____
(18 years or older)

Part III: Photograph and/or Videotape Consent & Release

I hereby grant to Sponsor the right to photograph and/or videotape me and further to use my name, face, likeness, voice, and appearance in connection with exhibitions, publicity, advertising, and promotional materials without any reservation, limitation, or consideration. This waiver specifically releases any common law causes of action or claims under Fla. Stat. 540.08 and expressly constitutes written consent for publication of my name, face, likeness, voice and appearance. I agree that if any portion of this document is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

Parent/Guardian Signature: _____ Date _____

Parent/Guardian Signature: _____ Date _____

Parent/Guardian Signature: _____ Date _____
(18 years or older)