

**PARENT-GUARDIAN CONSENT/RELEASE FORM**

We, the parents/guardians of \_\_\_\_\_ do hereby give our  
permission for him/her to attend \_\_\_\_\_  
*(Please Type or insert the name of the activity in the space above.)*

Date \_\_\_\_\_ Parent/Guardian Signature \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

We do hereby release and forever discharge the Diocese of Greensburg and the Parishes of Saint James the Greater and Our Lady Queen of Peace and the designated chaperones from any/all actions or suits in law or equity which we might hereafter have by reasons of injuries sustained by our son/daughter participating in the above mentioned activity. In case of emergency, we give permission for our child to be treated at a hospital and/or by a medical doctor.

In case of emergency, contact us at this phone number: \_\_\_\_\_

If we are unavailable, contact (name) \_\_\_\_\_ phone number \_\_\_\_\_

Our Insurance Company is \_\_\_\_\_ policy number \_\_\_\_\_

Date \_\_\_\_\_ Parent/Guardian Signature \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

**PLEASE COMPLETE THE FOLLOWING INFORMATION:**

Student Name \_\_\_\_\_ Home phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Age \_\_\_\_\_ Grade \_\_\_\_\_ High School/City \_\_\_\_\_

Parish/City \_\_\_\_\_

Indicate any illness or allergies of which we should be aware. Also, if the student will be taking any prescription medication, please note below:

## **PHOTOGRAPHIC RELEASE LETTER**

I hereby grant to the Parishes of Saint James the Greater and Our Lady Queen of Peace and their respective licensees, successors and assigns, the right and permission, with respect to those photographs taken of me or the minor named below on whose behalf I am signing, and with respect to any printed or electronic matter in connection therewith, to do the following:

1. To include such photographs on the Parish website(s)
2. To use my name, or the name of the minor on whose behalf I am signing, in connection with the foregoing.

I hereby release, discharge and agree to indemnify and hold harmless the Parishes of Saint James the Greater and Our Lady Queen of Peace and their legal representatives, licensees, successor and assigns, from all claims and demands whatsoever arising out of or in connection with the foregoing, and waive any right to inspect or approve the same.

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Signature of Subject of Photograph

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Printed Name

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Address

I hereby certify that I am the *[parent and/or guardian]* of \_\_\_\_\_, a minor under the age of eighteen years, and hereby consent on behalf of said minor to the use of any of the photographs taken of said minor pursuant to the terms set forth in this Photographic Release, including, without limitation, the release, discharge and hold harmless provisions thereof.