

**Snow Tubing Trip**  
**February 17<sup>th</sup>, 2012 6:00pm-10:00pm**  
**Ski Liberty Mountain Resort**  
**78 Country Club Trail, Carroll Valley, PA 17320**

Youth Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Parent Name: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Other number where Parent can be reached: \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Male Female (please circle)

In consideration of the wholesome recreational and learning experience in which my son/daughter will participate, I as parent or guardian of my son/daughter do hereby agree to allow my son/daughter to accompany the youth ministry/campus ministry group of Saint Clement I parish/school to attend a St. Clements interfaith Thanksgiving Prayer Service and Movie Night. I/we acknowledge receipt of the attached information sheet describing the planned activities.

In consideration of the opportunity for my son/daughter to participate in the Program, I agree to RELEASE AND HOLD HARMLESS AND INDEMNIFY Saint Clement I Parish, the Division of Youth & Young Adult Ministry, the Roman Catholic Bishop of Baltimore and his successors, a Corporate Sole, and all their agents, servants and employees from any liability, claims, demands and causes of action arising out of or relating to any loss, damage or injury sustained in connection with or arising out of my son/daughter's participation in the Program.

I hereby grant permission to any staff person to obtain medical care from a licensed physician, hospital, or medical clinic for my son/daughter in the event that I cannot be reached.

I hereby grant permission to any staff person to provide the following over-the-counter drugs to my son/daughter if requested by my son/daughter (Circle all that apply:)

Tylenol  Benadryl  Advil  Sudafed  Midol  Kaopectate  Neosporin Pepto Bismol  
ADD any other medical information concerning medication, allergies, illness, etc. \_\_\_\_\_

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ADD any dietary restrictions: \_\_\_\_\_

Parents/guardians of participants are advised that photographs or videotape of participants may be used in publications, websites or other materials produced from time to time by Saint Clement

I parish and the Division of Youth and Young Adult Ministry or the Archdiocese of Baltimore. (Participants would not be identified, however, without specific written consent.)

Parents/guardians who do not wish their child (ren) to be photographed or filmed should so notify Saint Clement I Parish and the Division in writing. Please note that the Division has no control over the use of photographs or film taken by media that may be covering the event in which your child(ren) participate(s).

Date \_\_\_\_\_

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

Child's Name: \_\_\_\_\_

**The following rules will be strictly enforced:**

- **Drugs, alcohol and/or tobacco products are prohibited at all times.**
- **Foul language and/or gestures are prohibited.**
- **Inappropriate physical contact is prohibited.**
- **Failure to comply with any of the adult chaperon instruction is unacceptable.**
- **Appropriate attire must be worn. No clothing or hats that indicate obscenities, violence, gang affiliation, drug, alcohol or sexual innuendoes allowed. No low-cut necklines, exposed midriffs, tube tops or backless shirts. Clothing must fit appropriately, no visible underwear or baggy pants.**

Child's Signature: \_\_\_\_\_

\*\*\*\*It is going to be cold, especially when going down the slopes. Please dress appropriately. Any young person who is not dressed appropriately (hat, gloves jacket, thick pants) will not be permitted to go snow tubing.

All youth under the age of 12 must be accompanied by an adult!

Payment and permission slip must be submitted by February 3<sup>rd</sup>! The office for Youth Ministry and Religious Education has a mail slot where papers can be submitted. Payments and forms can also be given to Deacon Paul or me, Dan Miller.

If you have any questions please contact me via email at [dcmiller@stclement1.org](mailto:dcmiller@stclement1.org) or you may reach me on my cell phone @443-670-7636.