

St. Aloysius Youth Group
DIOCESAN YOUTH CONFERENCE
MARCH 6 & 7, 2009
"FIGHT THE BLUR"

Cost: \$95 for first 70 registrants \$115 for additional registrants
Transportation: Bus
Consent Form and Liability Waiver

Participant Information

Name: _____
Home Phone: _____ Cell Phone: _____
Home Address: _____
E-mail: _____ Grade: _____
Birth Date: _____

Parent/Guardian Information

Name(s): _____
E-mail: (please write legibly) _____
Home Phone: _____
Mom's info: Cell Phone: _____
Dad's info: Cell Phone: _____

***** Are you willing to chaperone (circle one)? Y N**

T-shirt Size: S M L XL XL

Emergency Contact Information

Name: _____
Relation to Participant: _____
Home Phone: _____ Work Phone: _____
Cell Phone: _____

I grant permission for my child to participate in this youth ministry event. I understand that this event will take place under the guidance and supervision of parish volunteers of St. Aloysius Parish.

I agree on behalf of myself, my child named herein, or our heirs, successors, and assigns, to hold harmless and defend St. Aloysius Parish, its officer, directors, employees and agents, and the Diocese of Baton Rouge, its employees and agents, chaperones 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, its officers, directors and agents, and the Diocese of Baton Rouge, its employees and agents and chaperones, or representative associated with the event for reasonable attorney's fees and expenses which they 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 or diocese.

Parent/Guardian Signature: _____ Date: _____

Money and Forms are due January 14 to Steven Brooksher. No Exceptions!

**Information regarding T-Shirts will be given at the parent meeting on Sunday,
February 28th.**

No Refunds will be given.