

**ARCHDIOCESE OF BALTIMORE  
DIVISION OF YOUTH & YOUNG ADULT MINISTRY**

**Middle School Youth Ministry Events  
PERMISSION FORM AND RELEASE**

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)

School: \_\_\_\_\_ Grade: \_\_\_\_\_

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 participate with the youth ministry/campus ministry group of Immaculate Heart of Mary for Middle School Youth Ministry Events including dances and service experiences.

In consideration of the opportunity for my son/daughter to participate in the Program, I agree to RELEASE AND HOLD HARMLESS AND INDEMNIFY Immaculate Heart of Mary 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.  
(Check one of the following:)

\_\_\_\_\_ I am covered by hospitalization and medical insurance under policy  
# \_\_\_\_\_ issued by \_\_\_\_\_ .

\_\_\_\_\_ I do not have medical coverage and assume responsibility for the cost of hospitalization and medical care for my son/daughter.

\_\_\_\_\_  
Date

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

I understand that participation in these events is a privilege and respectful behavior toward myself, others and property is expected. A failure to show respect will result in immediate dismissal from the event and may prohibit future participation.

\_\_\_\_\_  
Student Signature

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