

Form 5 – ANNUAL ADULT ENROLLMENT & WAIVER

Catholic Diocese of Belleville and/or Parish of _____

Adult's Name: _____ Age: _____ Date of Birth: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Cell Phone: _____ E-mail: _____

Church/Parish you attend: _____ T-Shirt Size: _____

By signing below, I agree on behalf of myself, my heirs, successors, and assigns to hold harmless and release the Diocese of Belleville, Bishop and his Successors in office, Diocesan Employees, Volunteers, and the church named above, their officers, directors, and agents from any liability for illness, injury or death arising from or in connection with my attending youth ministry events beginning the **1st day of August, 2026 through the 31st day of August, 2027.**

In the event any legal action is taken by either party against the other party to enforce any of the terms and conditions of this agreement, it is agreed that each party is responsible for its own legal fees, court costs and expenses.

I also consent in perpetuity to the use by the Diocese of Belleville and/or church listed above, of any video recordings, photographs, audio recordings, or any other visual or audio reproduction in which I may appear. I understand that these materials, including websites and social media sites, are being used for promotion of the youth ministry of the Diocese of Belleville and/or church listed above which may include recruitment and fundraising efforts. I understand that I will receive no compensation should any of these materials be used.

I understand that this permission, liability waiver and acknowledgement will be kept on file and will accompany me on any and all programs and activities of the Diocese of Belleville and or the church listed above that I attend.

I certify that all the information I provided above is true and I understand, acknowledge and agree to all the terms, conditions and agreements stated above.

Signature: _____ Date _____

For Office Use Only:

As of the date below, the above-named adult is in full compliance with the Diocese of Belleville Child Protection Policies.

Location Coordinator Signature: _____ Date _____

No compliance actions/items due until: _____