

Form 6 – SINGLE EVENT ADULT PERMISSION AND WAIVER

Catholic Diocese of Belleville and/or the Parish of _____

Event Information

Description and Purpose of event: _____

- Date of event: _____
- Destination of event: _____
- Departure Time & Place: _____
- Return Time & Place: _____
- Overnight Accommodations (if applicable): _____
- Specific Activities Involved: _____
- Cost of Event, other specifics: _____
- Adults in charge and their phone numbers: _____

- Mode of transportation to and from event: _____

Liability Waiver

I, _____ freely choose to participate in the above described parish event. This activity will take place under the guidance and direction of parish employees and/or volunteers from the above named parish.

I have read, completed and submitted Form 2 –Medical Information and Waiver, Form 3 – Behavior and Appearance Agreement and Form 5 – Adult Enrollment and Waiver for myself and **there have been no changes** to personal, contact, insurance or medical information since I last completed said forms.

There have been changes to personal, contact, insurance or medical information since I last completed Form 5 – Adult Enrollment and Waiver and/or Form 2 – Medical Information and Waiver so I am including an updated copy of said form(s) with the submission of this form.

By signing below, I agree on behalf of myself, and my heirs, successors, and assigns to hold harmless, the Diocese of Belleville, the Bishop and his successors, employees, agents, volunteers, the Parish, its employees and volunteers from any and all claims for illness, injury, death and the cost of medical treatment therewith, arising from or in any way connected with my attending the event named above.

Signature of Participant: _____ Date: _____