OUR LADY OF THE ASSUMPTION CHURCH LATHAM, NY

PARISH RELEASE & CONSENT FORM

Activity:	Vacation Bible School	
Date:	Monday, August 1-Friday August 5, 2022; 8am-1pm	
Location:	Our Lady of the Assumption Church	The second second second
	498 Watervliet-Shaker Road	
	Latham, NY 12110	TeRUSale

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1	MARKETPLACE-	A.C.A.
Z	-MARNETTLACE-	1

__ Date _____

Veral Contraction

Name	Age	 Grade	

Parent/Guardian:

_____, give permission for my son/daughter ١, _

, to attend the above mentioned event, and if needed, to be evaluated, diagnosed, treated, and/or medicated in accordance with standard medical practice by licensed medical personnel. I relieve the parish of Our Lady of the Assumption of all responsibility and consequences that may arise as the result of this treatment. I will not hold Our Lady of the Assumption Parish or chaperones or representatives responsible in the event of injury. Further, I agree to accept any and all financial responsibility as a result of scheduling such treatment.

My child agrees to abide by all rules and regulations decided upon by the parish. If my child fails to abide by such rules he/she may be dismissed from the activity and I will be responsible for his/her transportation home.

Signature of Parent or Guardian	Date	
Allergies Required Medications		
Special Medical Conditions	Current Tetanus Booster Y	N
Insurance Carrier	Policy #	

Photo Release: .

I authorize and give consent for the taking of pictures (moving or still) of said youth, and further give permission for the reproduction of pictures for use in media, including but not limited to newspapers, magazine, radio and television. Photos may also be used in the church bulletin, on the church website, in brochures, mailings, and other printed materials.

Signed, ____

No signature here denotes that you do not give permission for use of photo materials.