

YOUTH PARTICIPANT REGISTRATION FORM

March for Life 2018

(Must be completed by all youth participants)

Name: _____

Address: _____

City: _____ State: _____ Zip code: _____

Phone: Home _____ Cell _____

Teen E-mail: _____

Parent E-mail: _____

Parish: _____ Gender: _____ DOB: _____

High School: _____ Grade: _____

To register for the pilgrimage, all youth participants and their parents must complete the Archdiocesan Parental Consent Form and Liability Waiver. An up-to-date Medical Information form must be on file at the parish/school for each participant, and a copy of that Medical Information form must be carried with the parish/school group leader on the March for Life.

Contact your group leader for cost and expectations of participants on the March for Life.

By registering for this pilgrimage, I agree to follow the rules and code of conduct established by the Archdiocese of Mobile, Office of Youth Ministry, and my parish. I recognize that I could be removed from the pilgrimage for not complying with the rules, and that my removal would be reported to proper parish and/or school administration. I will not bring illegal drugs, alcohol, or weapons to the March for Life.

Signature: _____

Date: _____

**PARENTAL/GUARDIAN
CONSENT FORM AND LIABILITY WAIVER
MARCH FOR LIFE PILGRIMAGE 2018**

Dear Parent or Legal Guardian:

If you would like your child to participate in this event that requires transportation to a location away from the parish, school or archdiocesan office site, please complete, sign, and return this statement of consent and release of liability. As parent or legal guardian, you remain legally responsible for any personal actions taken by the named minor ("participant").

This activity will take place under the guidance and supervision of employees and/or volunteers from Archdiocese of Mobile. A brief description of the activity follows:

Type of event: March for Life Pilgrimage to Washington, D.C.

Destination: Washington, D.C.

Individual(s) in charge: Adam Ganuchau, Office of Youth Ministry Director

Date and estimated time of departure and return: Depart Wednesday 1/17/18. Return Sunday 1/21/18

Mode of transportation to and from event: Charter Buses (Gulf Coast Tours)

Participant's name: _____ Birth date: _____

Parent/Guardian name: (please print) _____

Address: _____

Cell Phone: _____ Other Phone: _____

Parent email: _____

Student Agreement/Code of Conduct:

While participating in this field trip, I will accept responsibility for maintaining good conduct and appearance. I will listen attentively, follow directions and be respectful to everyone. I understand and accept that all school and parish rules and disciplinary actions apply to this trip. My parent(s)/guardian(s) and I have discussed this code of conduct for the field trip.

Participant's Signature: _____ Date: _____

I agree on behalf of myself, my child named herein, or our heirs, successors, and assigns, to hold harmless and defend (name of parish/school/institution) _____, its officers, directors, employees and agents, and the Archdiocese of Mobile, its employees and agents, chaperones, or representatives associated with the event, from any claim arising from or in connection 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/school/institution, its officers, directors and agents, and the Archdiocese of Mobile, its employees and agents and chaperones, or representative associated with the event for reasonable attorney's fees and expenses that 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/school/institution/archdiocese.

Signature: _____ Date: _____