



## Archdiocese of Mobile Office of Youth & Young Adult Ministry March for Life Pilgrimage 2019

*Before I formed you in the womb, I knew you; before you were born, I dedicated you; a prophet to the nations, I appointed you – Jeremiah 1:5*

The Archdiocese of Mobile Office of Youth & Young Adult Ministry, in conjunction with the other ministries within the Department of Catholic Education, will coordinate a pilgrimage to Washington, D.C., for the annual March for Life. Teens from across the Archdiocese are invited to participate in this powerful event. Through our youth ministry pilgrimage, we hope to witness to the great and God-given dignity of all human life, from natural conception to natural death.

Registrations for the March for Life Pilgrimage will be collected and arranged through a parish's youth ministry program; no individual registrations will be accepted. Parish leaders will submit a group registration form in addition to all individual registration forms by the deadlines listed below.

- ❖ The dates for the pilgrimage are Wednesday January 16 through Sunday January 20, 2019.
- ❖ Open to all high school youth (grades 9-12) of the parishes and high schools within the Archdiocese of Mobile; teens must register through a group, as no individual registrations will be accepted.
- ❖ We will again have the blessing of our seminarians and priests on our pilgrimage. Archbishop Thomas J. Rodi will join us in Washington, D.C.
- ❖ The cost of the pilgrimage will be \$300 – includes hotel accommodations, museum and event entrance fees, charter bus transportation, and additional supplies
- ❖ We will depart Alabama on Wednesday evening, 1/16/19. We will arrive in Washington, D.C. on Thursday 1/17/19.
- ❖ Students will miss two days of classes –Thursday and Friday. OYM will provide school excusal letters if necessary.
- ❖ The groups from the Archdiocese of Mobile will gather for Archdiocesan events in Washington, D.C.
- ❖ The March for Life will take place on Friday, January 18, 2019.
- ❖ Participants will be able to visit museums and monuments in Washington and attend other spiritual opportunities with teens from across the country.
- ❖ We will depart Washington on Saturday 1/19/19 and arrive in Alabama on Sunday 1/20/19.

For more information, contact the Office of Youth & Young Adult Ministry at [oym@mobarch.org](mailto:oym@mobarch.org) or 251-433-4138.

Let us pray for the strength to always preach the Gospel of life!

## ADULT CHAPERONE REGISTRATION FORM

**March for Life 2019**

(Must be completed by all adult participants)

Please check all that apply: \_\_\_\_\_ Group Leader    \_\_\_\_\_ Chaperone

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Phone: Home \_\_\_\_\_ Cell \_\_\_\_\_

E-mail: \_\_\_\_\_

Parish: \_\_\_\_\_ Gender: \_\_\_\_\_ DOB: \_\_\_\_\_

To register for this pilgrimage, all adult participants must complete the Archdiocesan Field Trip Adult Liability Waiver.

Contact your group leader for cost and expectations of chaperones 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 & Young Adult 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: \_\_\_\_\_

# FIELD TRIP ADULT LIABILITY WAIVER

(Adult leaders and chaperones)  
MARCH FOR LIFE PILGRIMAGE 2019

I, \_\_\_\_\_ agree on behalf of myself, my heirs, assigns, executors, and personal representatives, to hold harmless and defend \_\_\_\_\_ School/Parish/Institution, and the Archdiocese of Mobile, its officers, directors, employees, or representatives associated with the field trip from any and all liability claims, loss or damage arising from or in connection with my participation in the field trip.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Medical Matters:** I hereby warrant that to the best of my knowledge, I am in good health.

**Emergency Medical Treatment:** In the event of an emergency, I hereby give permission to transport me to a hospital for emergency medical or surgical treatment.

**Specific Medical Information that may impact medical treatment:** \_\_\_\_\_  
\_\_\_\_\_

In the case of an emergency contact:

Emergency contact person: \_\_\_\_\_

Emergency Contact's Cell Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_

Family doctor: \_\_\_\_\_ Phone: \_\_\_\_\_

Family Health Plan Carrier: \_\_\_\_\_ Policy #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

# YOUTH PARTICIPANT REGISTRATION FORM

**March for Life 2019**

(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 & Young Adult Ministry, and my parish/school. 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, tobacco products (including e-cigarettes/vaping), 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

Destination: Washington, D.C.

Individual(s) in charge: Adam Ganucheau

Date and estimated time of departure and return: Depart Wednesday 1/16/19. Return Sunday 1/20/19

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: \_\_\_\_\_