

SNOW SLAM 2019 PERMISSION FORM

I give permission for my child _____ to attend Snow Slam 2019 at Bishop's Ridge: Stoney Camp & Retreat Center over Presidents Day weekend, February 15 – 17, 2019.

Cost is \$50. Please register and pay online at **bishopsridge.org** on the Snow Slam tab.

Please send a box or bag of snacks to feed 10 – 15 people with this permission form.

I am able to:	<input type="checkbox"/> Chaperone	<input type="checkbox"/> Chauffeur Youth
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Emergency Contact:

Name:	
Phone:	

PARENT AGREEMENT (To be signed by Parent of Legal Guardian ONLY)

1. I give my permission for my daughter/son to attend this Diocesan activity.
2. I will not hold leaders or other volunteers from the Diocese of the Rio Grande, any Church or private individual, who are providing their support to this activity, liable for any bodily injury that might occur through accident beyond the limits of insurance carried for such injury.
3. I will advise my daughter/son as to appropriate conduct while participating in this event.
4. (If applicable) My daughter/son named above is under a doctor/professional care for _____ and is required to take the following medication(s):

Instructions for use:

5. List any allergies and/or other special medically – related conditions:

6. In the event that my daughter/son engages in harmful, illegal, or flagrantly disruptive behavior during the course of the Diocesan activity, I understand I will be responsible for costs of transporting them from the activity back to my home and for damages to persons or property caused by my daughter/son.
7. I/we hereby delegate to _____ our/my powers regarding medical care and custody of my daughter/son, _____. This delegation is made pursuant to 45-5-104 NMSA 1978. This delegation is for the period of the activity as designated above only.
8. Medical Insurance company: _____
Medical Insurance policy number: _____ Group number: _____

9. Photo/Video/Website Release: I give the Diocese of the Rio Grande the right to use my child's name, picture in all forms and in all media for promotional and/or other lawful purposes.

10. INDEMNITY PROVISION: I agree to indemnify and hold harmless the Diocese of the Rio Grande, their representatives, agents, and employees, for any claim and actions based on or arising out of injuries sustained or alleged to have been sustained in connection with the Diocesan activity regardless of cause or of any fault or negligence on the part of the Diocese of the Rio Grande or their representative, agents, or employees, or on the part of any participant in the Diocesan activity.

SIGNATURE OF PARENT OR LEGAL GUARDIAN: _____

DATE: _____

Print Name of Parent or Guardian: _____ Relationship: _____

YOUTH AGREEMENT (TO BE SIGNED BY THE YOUTH ONLY)

1. I will act responsibly and will respect the property and obey the rules of all the places we visit and facilities we use.

2. I will maintain contact at all times with the authorized leaders of our group and will obey the rules of proper behavior established by them.

3. I agree not to bring any harmful, illegal, or prohibited items to this event. I agree not to get involved with any harmful, illegal, or prohibited activity while I'm there. Harmful, illegal, or prohibited items and activities include but are not limited to: guns, knives, illegal drugs or drugs not prescribed to me, improper images, tobacco products, bullying, or inappropriate interactions between the sexes.

YOUTH SIGNATURE: _____ DATE: _____

Keep this section for your records.

Paula Mote

YaYA (Youth and Young Adult) Missioner
pmote@dioceserg.org
 Cell: 505-328-5181

Bishop's Ridge: Stoney Camp & Retreat Center
 7855 Old Santa Fe Trail
 Santa Fe, NM 87505
 On site phone: 505-820-3166

Event: Snow Slam 2019 February 15-17

Drop off 5:30 – 7 pm
Pick up 12:00 pm noon