

WAIVER AND RELEASE
CATHOLIC DIOCESE OF EVANSVILLE

School/Church St. Philip City Mt. Vernon

Youth's Name _____ Youth's Grade _____

Event Archery

Date(s) of Event 10/2017 through 03/2018

I/We, the parent(s) of the above-named youth, hereby give my/our approval for his/her participation in the above event. I/We assume all risks and hazards incidental to the conduct of the activities and transportation to and from the event. I/We do further hereby waive, release, absolve, indemnify and hold harmless the Bishop of the Catholic Diocese of Evansville,

St. Philip Parish,

Fr. Claude Burns Pastor,

and any of their respective affiliates, successors, agents, employees, members, and representatives, adult sponsors, and other volunteers involved in the activities and transportation associated with the event from any and all claims, including claims of personal injury to my/our youth or property damage, under any theory of law (including negligence, but not reckless or intentional conduct) in any way resulting from or arising in connection with the activities and/or transportation to and from the event.

Parent Signature _____ Date _____

Home phone # _____ Email address _____

Father's cell # _____ Mother's cell # _____

Archery Shirt – (Please circle one) Last year or New size

Size needed: _____

Parent meeting on Sunday October 8th @ 2:00 P.M. in the St. Philip Gym.

Sign-ups are due Friday September 29, 2017

Each Student participant is required to pay a **\$30.00** Athletic Fee for each sport they participate in. Please submit payment of **\$30.00** along with the enrollment form. Checks for Athletic Fees should be made out to St. Philip and turned into the school office.