

Parental/Guardian Consent Form and Liability Waiver for Overnight Events

Participant's name: _____
Birth date: _____ Sex: _____
Parent/Guardian's name: _____
Home address: _____
Home phone: _____ Cell phone: _____
I, _____ grant permission for my child, _____
Parent or guardian's name Child's name

to participate in this parish event that requires transportation to a location away from the parish site. This activity will take place under the guidance and direction of parish employees and/or volunteers from St Francis Church, CS.

Name of Parish

A brief description of the activity follows:

Type of event: Zipline Outing
Date of event: July 27, 2026
Destination of event: Edge Ziplines and Adventures
Individual in charge: Terrie Hernandez
Estimated time of departure and return: 9am-1pm
Mode of transportation to and from event: private vehicles

As parent and/or legal guardian, I remain legally responsible for any personal actions taken by the above named minor ("participant"). I hereby warrant that to the best of my knowledge, my child is in good health, and I assume all responsibility for the health of my child.

I agree on behalf of myself, my child named herein, or our heirs, successors, and assigns, to hold harmless and defend St Francis of Assisi, CS, its officers, directors, employees

Name of Parish

and agents, and the Arch/Diocese of Colorado Springs, its employees and agents, chaperons, 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, its officers, directors and agents, and the Arch/Diocese of Colorado Springs, its employees and agents and chaperons, or representative associated with the event for reasonable attorney's fees and expenses which 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/diocese.

Signature: _____ Date: _____