

**Archdiocese of Galveston-Houston
Most Holy Trinity Parish
Angleton, Texas**

PARENTAL/GUARDIAN CONSENT AND LIABILITY WAIVER

Participant's Name: _____ Date of Birth: _____
 Home Address: _____
 City _____ Zip Code _____
 Parents/Guardians:
 _____ (Father) _____ (Mother)
 Home Phone _____ Cell Phone _____
 Grade: _____ Age: _____ Sex: _____

CONSENT AND LIABILITY WAIVER

Important! To be filled out by the Parent/Guardian for youth under 18 years of age. If participant is 18 years of age or older, consent must be signed by individual.

I (name of parent/guardian) _____ , grant permission
 for my child, (participant's name) _____ , to participate
 (activities/event) _____ ,(dd/mm/yy) _____
 (place) _____ .

I agree on behalf of myself, my child's other parent if known or living (name of parent) _____, my child named herein, our heirs, or successors, and assigns, to hold harmless and defend the Diocese of Galveston-Houston, the sponsoring parish (its pastor, DRE, CRE, youth minister, other agents, etc.) or any representative associated with the scheduled activity unless the parties involved were careless or negligent.

 Signature (parent/Guardian) _____ Date _____

Signature (Participant 18 years of age or older must sign own consent) _____ Date _____

PHOTOGRAPHY CONSENT

As parent/guardian, I understand that promotional pictures (individual and group) may be taken during this event. I give permission for my son's/daughter's picture to be used for promotional materials (newsletter, web page, calendars, power point, etc. in highlighting the event).

 Signature (parent/guardian) _____ Date _____