**2018-2019 Faith & Family Release Form**

**GENERAL RELEASE**: I/we hereby give permission for my child to participate in the activities hosted by the St. Benedict Parish Sacramental Preparation Process. I understand and assume the risks inherent with these activities from other parties, but I also understand that all reasonable care and supervision will be exercised to provide the general well-being for my child. I, individually, and on behalf of my child do hereby release, covenant not to sue and save harmless: The Salesians of Don Bosco, St Benedict Parish, the Archdiocese of Toronto, all the employees and volunteers of this ministry, from any and all claims for any and all harm arising my child as a result of their participation in the activities.

Initial: \_\_\_\_\_

**PHOTO & VIDEO RELEASE**: I hereby give permission for my child to be photographed and videoed at the activities by the St. Benedict Sacramental Preparation leaders or their representatives. These photographs and videos may be used reasonably by the Salesians/ St. Benedict Parish in publications, including electronic publications and/or in audio-visual presentations, promotional literature, advertising or in other similar ways.

Initial: \_\_\_\_\_

**MEDICAL RELEASE:** I hereby give permission that the parish or Salesian representative obtain professional medical treatment for my child in the unlikely event of injury or illness during these activities. I request that the Emergency Contact be notified in a timely manner if such a need arises. I agree to pay any expenses incurred for such treatment(s).

Initial: \_\_\_\_\_

**PICK UP POLICY:** As primary parent/ guardian, I understand it is my responsibility to pick up my son/ daughter from the designated parish location at the time indicated for specific events. I understand it is my responsibility to notify the appropriate St. Benedict Sacramental Preparation Representative should any other individual(s) collect my child at the end of a gathering. I will provide a written note for the designated representative giving my child permission to be accompanied by someone other than a parent.

Initial: \_\_\_\_\_

**Participant**

First Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please print

**Parent/Guardian**

First Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please print

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

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