

**PARENT/GUARDIAN CONSENT FORM AND LIABILITY WAIVER**

**PARISH/SCHOOL** \_\_\_\_\_

**PARTICIPANT'S NAME** \_\_\_\_\_

**Sex** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_

**PARENT/GUARDIAN'S NAME** \_\_\_\_\_

**Home Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Home Phone** (\_\_\_\_) \_\_\_\_\_ **Work** (\_\_\_\_) \_\_\_\_\_

**In case of an Emergency please contact:** \_\_\_\_\_

**Relationship:** \_\_\_\_\_ **Phone No.** (\_\_\_\_) \_\_\_\_\_

*I, \_\_\_\_\_ grant permission for my child to participate in this event. I understand that this event will take place under the guidance and direction of parish employees and/or volunteers from the parish/school. My understanding of the event is:*

**Event: Sinkland Farms Pumpkin Festival**

**Place/Destination: Sinkland Farms in Christiansburg, VA**

**Individual in Charge: Sue Ellerbrock**

**Date(s) and Time(s): Sunday, Oct. 2<sup>nd</sup>, 2016**

**Mode of Transportation: Private Cars**

*As parent/legal guardian, I remain legally responsible for any personal action taken by my child. I agree to hold harmless this parish/school [named above], and the Diocese of Richmond as well as its officers, directors, agents, chaperons, or representatives associated with this event, arising from or in connection with my child attending this event, or including but not limited to accidents, emergencies, exposure to reckless conduct of persons .*

**PARENT/GUARDIAN SIGNATURE:**

\_\_\_\_\_ **Date** \_\_\_\_\_