## Diocese of Palm Beach Field Trip Consent and Release

Name of Participant:					
Name of Parent/Guardian:					
Address and Telephone Number of Pare	ent/Guard	dian:			
Address:					
City:	State:		Zip:		
Emergency Contact Information (includ	des teleph	one numb	er and ac	dress):	
Name:		Phone:	(		)
Address:					
City:	State:		Zip:		
Description of Field Trip/Activity:					

## <u>LIFETEEN at Boynton Beach Oceanfront Park at 6415 N Ocean Blvd, Boynton Beach. Sunday, May 1, 2016 7:00 pm – 8:45 pm for pizza, beach volleyball & activities, photos and a rosary.</u>

I hereby freely and voluntarily consent to participation in the trip/activity described above. I agree to assume all financial responsibility for participation in the field trip/activity and hold <u>St Vincent Ferrer</u>, Diocese of Palm Beach, Inc. and all of their corporate members, affiliated entities, employees, officers, directors, and agents ("Sponsor") harmless for all costs incident to my participation in this field trip/activity.

I, the undersigned, a participant in the field trip described above, do waive and release Sponsor from liability for any injury, accident, or damages caused by any vehicle, weather, sickness, or otherwise stemming from any act or omission of any individual. I also release Sponsor and agree to indemnify it with regard to any financial obligations incurred by my acts or omissions.

I understand that all travel involves some risk, and I hereby agree to assume and consent to such risk. I hereby waive and release Sponsor for any injuries, damages, or losses incurred in connection with actions, omission or conditions or developments, or any other actions, omissions or conditions within or outside Sponsors control. By my participation in this program I voluntarily assume all risks involved in such travel, whether expected or unexpected. I hereby acknowledge that I have been warned of such risks, and that certain insurance companies do offer insurance against some of the many perils noted and that I may opt to insure myself should I choose.

I hereby grant Sponsor full authority to take whatever actions they may consider in their sole discretion to be warranted under the circumstances concerning my healthy and safety and I specifically and fully release each of them from any liability for such decisions or actions as may be taken in connection therewith. I authorize Sponsor at its discretion, to place me at my own (or my parents=or my guardians) expense and without further consent, in a hospital that is readily available, to place me in the hands of a local physician for treatment, should the need arise at my expense.

I agree to comply fully with the rules of Sponsor and any travel company and I agree that Sponsor has the right to enforce its standards of conduct as determined and interpreted in its sole discretion, and that, should I fail to comply with them, Sponsor has the right to terminate my participation in the program. In the event of termination, I agree to be sent home at my parent(s)/guardian(s) expense. I understand that this is an organized program and that group standards must be observed. I hereby waive and release Sponsor from any claim arising out of my failure to remain under such supervision. In addition, I acknowledge the right of Sponsor

to terminate my participation at any time of failure to maintain standards or for any actions or conduct for which Sponsor deems incompatible with the interest, harmony, comfort, and welfare of other students. I specifically agree not to bring any weapons or illegal drugs with me on the field trip/activity.

I acknowledge that Sponsor is not responsible either for any injury or loss whatsoever suffered by me during periods on independent travel or during any absence from the program of Sponsor.

All references in this release to Sponsor shall also include all of its chaperones, group leaders, faculty members, administrators, advisors, and agents. All reference to the parent@ of the participant includes the legal guardian or other adult responsible for the participant.

I have read the terms and conditions set forth by Sponsors and I agree that this constitutes a part of any agreement with Sponsor. I understand and agree to all of Sponsor terms as set forth in the descriptive information and in this Release. I agree that if any portion of this document is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

Signature of participant:	Date:
Please print participant name:	
the foregoing release and examined the information this Field Trip Consent and Release (including such pand hereby relinquish any claims that I may have agand in my capacity as legal representative (as applications arising as a result of the participant=s leaving	an of the above-signed participant, and that I have read in the description. I hereby join in each and every part of part as may subject me to personal financial responsibility) against Sponsor as set forth above, both in my own behalf icable) of the participant, including without limitations any the supervision of Sponsor. I agree that if any portion of this eremaining portions shall remain in full force and effect.
Signature of Parent/Guardian:	Date:
I hereby grant to Sponsor the right to photograph a voice and appearance in connection with exhibitions, pu	eotape Consent Release  nd/or videotape me and further to use my name, face, likeness, blicity, advertising, and promotional materials without any ically releases any common law causes of action or claims under
appearance. Signature of participant:	Dato
Please print name of participant:	
I certify that I am the parent or legal guardian of the release and examined the information in the description. Videotape Consent and Release (including such part as relinquish any claims that I may have against Sponsor as s	ne above-signed participant, and that I have read the foregoing I hereby join in each and every part of this Photograph and/or may subject me to personal financial responsibility) and hereby et forth above, both in my own behalf and in my capacity as cluding without limitations any claims arising as a result of the nat is any portion of this document is found to be void or
Signature of Parent/Guardian:	Date:

Please print name of parent/guardian: