

St. John Vianney Church - Youth Ministry Event Permission Form

John Gencarelli – Faith Formation Director
St. John Vianney Church
5801 Oak Hills Drive
Omaha, NE 68137

Phone - 402-895-0896
Fax – 402-932-1336
jgencarelli@sjvomaha.org
www.facebook.com/StJohnVianneyTLM

Please fill in all information below – please print clearly

Participant's Name	_____	Name of School	_____
Date of Birth	_____	Grade this year	_____
Sex (Male or Female)	_____	Age	_____
Participant's E-Mail	_____	Graduation Year	_____
Participant's Cell Phone	_____	Name of Parish	_____
Parent/Guardian Name(s)	_____		
Street Address	_____		
City, State & Zip Code	_____	Cellular Phone	_____
Home Phone Number	_____	Business Phone	_____
Parent/Guardian E-mail	_____		

I, _____ Grant permission for my youth, _____
(Printed Parent or Guardian name) (Printed Youth's Name)

To participate in this St. John Vianney Youth Ministry event that is located away from the parish site. This activity will take place under the guidance and direction of parish adults, including the St. John Vianney Faith Formation Director and/or volunteers from the parish and/or community. A brief description of the event follows:

Type of Event:	Trip to the Bellevue Berry and Pumpkin Ranch for a Hayrack Ride/Haunted House & Bonfire
Who May Attend:	All Students grades 9-12
Location:	Meet in St. John Vianney Parking Lot at 6:00 pm
Date and Time:	Sunday, October 22 nd – Meet At St John Vianney at 6:00 pm and will return around 10:00 pm
Transportation:	Adult Drivers
Cost:	\$35.00 per person due by October 18 th , 2017 (see flyer for details)

Emergency Medical Agreement

The following authorization is given in regard to the above named child.

Please Print Clearly

Name of physician	_____	Office Phone	_____
Insurance company	_____	Policy Number	_____
Any existing medical conditions an emergency physician would need to know (allergies, drug reactions) YES or NO			
Explain	_____		

Please read, complete, and sign all information on other side! Thank you!

Our first aid kit does not contain medical supplies such as epi-pins, inhalers, or insulin, for diabetes or asthma related conditions.

I hereby authorize a representative of St. John Vianney Church Youth Ministry to take my child to a physician or facility for medical treatment in the event of an emergency in which neither a parent nor the adult in whose care the minor has been entrusted can be reached. If the above named physician cannot respond, I authorize any physician or medical centers to treat my child.

If a parent or guardian cannot be reached, whom should we notify?

Name _____ Phone Number _____

Signature of Parent/Guardian _____ Date _____

As parent and/or guardian, I remain legally responsible for any personal actions taken by the above named minor ("participant"). I agree, on behalf of myself, my child named herein, or heirs, successors, and assigns, to hold harmless and defend **St. John Vianney Church**, it's officers, directors and agents, the Archdiocese of Omaha, chaperones, or representatives associated with the event arising from or in connection with my child attending the event or in connection with any illness or injury or cost of medical treatment in connection therewith, and I agree to compensate the parish, its officers, directors and agents, the Archdiocese of Omaha, chaperones, or representatives associated with the event for reasonable attorney's fees and expenses arising in connection therewith.

Signature of Parent or Guardian

Date

Code of Behavior

We are happy that you are joining us as part of a St. John Vianney Youth Ministry sponsored event. The Code of Behavior has been developed as a way of helping participants understand what is expected of them during the event, and to help make it a fun, healthy, and growth filled experience for all involved. Please read through the Code carefully. You will be expected to honor and uphold it throughout your time with us.

- As necessary as rules are to maintain order, they can't and won't guarantee a successful experience. Success depends on people's willingness to work together for the common good.
- Participants take part in this experience as part of St. John Vianney Church Youth Ministry. The adult leader maintains primary responsibility for actions of participants. Families of the participant assume responsibility for damage done to the environment or facilities by individual participants.
- Youth participants must inform the leader of his/her whereabouts at all times. Participants will travel to and from activities as a group.
- Participants are expected to display Christian behavior at all times. Disrespectful comments made towards or of another person, swearing, comments with sexual overtones, etc. will not be tolerated.
- Name badges should be worn during all program activities when applicable.
- Dress throughout the experience is casual; however shirts and shoes must be worn at all times.
- Smoking is not allowed at any St. John Vianney Church Youth Ministry sponsored event without a signed consent from a parent.
- The purchase, possession or consumption of alcohol or illegal drugs by participants will result in immediate dismissal from the program. Major infractions of the Code of Behavior will meet with the same consequences.

Overnights, Lock-ins & Retreats

- Socializing should take place only in the designated public areas of the housing facility. No visiting is allowed in sleeping areas occupied by the opposite sex without the permission and presence of an adult leader.
- At retreats participants must be in their respective rooms by curfew time. The noise level in the sleeping areas should be kept at a minimum. Scheduled quiet and silent times must be honored.

Parent or Guardian: I agree that my child shall abide by the rules and regulations outlined in the **St. John Vianney Church Youth Ministry Code of Behavior**. I have reviewed it and discussed the *Code* with my child prior to signing this form. I agree that if my child fails to consistently abide by the *Code* or engages in a serious infraction of the *Code*, he or she may be immediately dismissed from the St. John Vianney Church Youth Ministry sponsored program and sent home at my expense.

Signature of Parent or Guardian

Date

Youth Participant: I understand and agree to the St. John Vianney Church Youth Ministry Code of Behavior. I also understand that my parent(s) or guardian will be notified at the time of any infractions requiring my dismissal from the program and that I will be sent home at my own or their expense. (Your signature must appear below to participate in the St. John Vianney Church Youth Ministry sponsored event.)

Signature of participating youth

Date

Parents: We need Chaperones! I am willing to help YES or NO

All forms and money are due back to the parish office by: October 18, 2017