



EPIPHANY OF THE LORD

CATHOLIC PARISH

Youth Ministry Kick-off Event

Youth of the parish in grades 6th-12th are invited to join us for our very first activity as Epiphany of the Lord Youth Ministry

<i>Date</i>	Sunday, Dec. 17, 2017	<i>Time</i>	3:00 – 8:30 pm
<i>Location</i>	Saint Thomas Aquinas Campus / The Toledo Zoo		
<i>Cost</i>	\$5.00 (cash or check payable to 'Epiphany of the Lord')	<i>Transportation</i>	Carpooling
<i>Details</i>	<ul style="list-style-type: none"> ❖ Afternoon of Grace (Adoration and Reconciliation) begins at 3 pm at St. Thomas Aquinas Church. We hope you and your family will join us for this parish-wide event. ❖ Between 4:00-4:30pm 6th-12th grade youth and chaperones will be gathering in the Church Hall to enjoy fellowship and pizza! ❖ We will be departing Saint Thomas Aquinas Church Parking Lot at 5:30pm for the Toledo Zoo ❖ We will be arriving back to Saint Thomas Aquinas at 8:30pm; you may pick up your child in the Church Parking Lot 		



Lights Before Christmas Youth Ministry Outing
Permission Slip & Emergency Info

Youth name (First/Last) _____

Grade _____ **School** _____

Parent/Guardian's Name(s) _____

Parent/Guardian's Email _____

Parent/Guardian's Home/Cell Phone _____

Youth's cell phone (if applicable- to be used to text any last-minute change) _____

May we take and use pictures of the above-named child in social media accounts affiliated with Epiphany of the Lord parish? ___ **YES** ___ **NO**

Name/Number of additional emergency contact _____

Preferred Hospital _____ **Physician's name** _____

Please note any medical/medication info that may be pertinent in an emergency:

I, VOLUNTARILY AND KNOWINGLY ACCEPT AND ASSUME THE KNOWN RISKS involved in the program for myself and my child names above and, in consideration for Epiphany of the Lord Parish allowing us to participate in the program, on behalf of myself, my heirs, executors, administrators, and assigns, I hereby FULLY RELEASE AND FOREVER DISCHARGE the parties named above, and only those parties, along with their officers, agents, employees, successors, assigns, and volunteers, from any and all losses, expenses, inquiries, demands, actions, causes of action, damages, rights and claims, of whatsoever kind or nature, whether in law or in equity, arising out of or in connection with our participation in the program, and further WAIVE ANY RIGHTS we may have in that regard against those Released Parties.

I understand and acknowledge the significance and consequence of my specific intention to release any and all such claims and I hereby ASSUME FULL RESPONSIBILITY for any and all matters listed above.

THIS RELEASE IS KNOWINGLY AND VOLUNTARILY SIGNED WITH THE INTENT TO BE LEGALLY BOUND, AND IS SIGNED AFTER CAREFULLY READING AND FULLY UNDERSTANDING THE TERMS AND CONSEQUENCES OF THIS RELEASE.

Parent/Guardian Signature _____ **Date** _____

*Please return with \$5.00 payment (cash or check made payable to 'Epiphany of the Lord') to **Willie Degener** at Epiphany of the Lord Parish Office no later than **Dec. 12, 2017**. You may return the form via email (wdegener@epiphanyofthelordparish.org) and bring payment the date of the event. Please contact Willie at the above email address if you are interested in chaperoning or have questions.*