

Holy Redeemer Parish

Altar Server/CYM EVENT: Waldameer Park, Erie, PA
on Tuesday, June 27, 2017 from 10:00 AM to 9:00 PM
Bus leaving Catholic Center Parking Lot at 10:00 AM

NAME: _____ **Age** _____ **Male / Female**

Address: _____ **Phone #:** _____

PERMISSION

I/we, the parents or guardians of the above mentioned child, for myself/ourselves and for my/our child, give permission for my/our child to participate in the above mentioned activity on the above written date.

MEDICAL AUTHORIZATION

In the event of any injury or illness to my/our child during his/her participation in this trip, I/we hereby give my/our permission for the necessary medical treatment to be given to my/our child.

I/we agree that in case of injury to my/our child, I/we will apply my/our hospitalization and/or accident insurance toward payment of the expenses incurred and will not look to **Holy Redeemer Parish** and the **Roman Catholic Diocese of Pittsburgh** for the payment of any medical costs or injury related cost.

Parent/Guardian Signature _____

Parent/Guardian Phone Number _____

Insurance Company _____ **Policy Number** _____

Name & Phone Number of Person if parent is not available.

Date: _____

RSVP by May 25, 2017

Cost: See enclosed letter.