

IRON MEN III - RETREAT DAY

St. Anthony of Padua Parish Center
101-103 Myrtle Avenue, Passaic, NJ 07055
Feb. 25, 2018 – 8:30am – 4:30pm

COST:
\$10

Health Information - Release of Liability - Hold Harmless Agreement

NAME: _____ DATE OF BIRTH: ____/____/____
ADDRESS/CITY/ZIP: _____
NAME OF PARENT OR GUARDIAN: _____
PHONE: _____ EMERGENCY PHONE: _____
HIGHSCHOOL/COLLEGE: _____ GRADE: _____
PARISH (Or Church you attend): _____ CITY: _____
HEALTH INSURANCE COMPANY: _____ POLICY #: _____
Are you currently under the care of Physician, psychologist, psychiatrist? _____
Name of Family Physician: _____ PHONE: _____
Last Tetanus Shot: _____ Allergies to Drugs or Foods: _____
ALLERGIES TO: DOGS ___ CATS ___ BIRDS ___ OTHER _____
DOES YOUR TEEN HAVE ANY OF THE FOLLOWING CONDITIONS: (Check all that apply)
Heart Condition ___ Diabetes ___ Hypoglycemia ___ Physical Handicap _____
Do you have any special dietary needs or restrictions? _____
Special Medications, blood type or pertinent medical information: _____

I/we request that my/our son attend the Iron Men Retreat Day, Sunday, Feb. 25, 2018, SPONSORED BY ST. ANTHONY OF PADUA YOUTH MINISTRY, FROM 9:30 AM thru 6:00 PM under the auspices of St. Anthony's Church. I/we have read the foregoing Health Information/Release of Liability/ Consent to Treat Form and all answers are correct. I/we can be reached at the telephone numbers referred to above but if emergency medical care or treatment shall be necessary and if I/we cannot be contacted, I/we authorize the delegated agents of St. Anthony's Church to act on my/our behalf and approve treatment.

PHOTOGRAPHIC RELEASE: By signing this form, the parent/guardian gives permission and waives the right to any type of compensation, for their child to be photographed or video taped at any/all youth group activities sponsored by the program. Pictures/Videos may be used for publicity or educational purposes.

RELEASE OF LIABILITY: In consideration of St. Anthony's Church accepting my/our daughter's registration for this event (and in consideration of St. Anthony's Church accepting MY registration - for those 18 years of age or over), I/we release, hold harmless, and discharge St. Anthony's Church, Most Rev. Arthur J. Serratelli, S.T.D., S.S.L., D.D. and the Roman Catholic Diocese of Paterson, its officers, Trustees, employees, agents, and affiliates of and from any and all liability, claim, loss, damage, cost or expense and waive any such claims against any such person or organization arising directly or indirectly from or attributable to any action or omission to act of any such person or organization in connection with this event and I/we further agree to indemnify and hold harmless St. Anthony's Church and its aforesaid affiliated personnel from any such liability, claim, loss, damage, cost, or expense.

DATE

PARENT/GUARDIAN SIGNATURE

APPLICANT SIGNATURE IF 18 YEARS OF AGE OR OLDER

"As iron sharpens iron, so one man sharpens another."
Proverbs 27:17