

Espiritu Santo Catholic Church

2405 Philippe Parkway, Safety Harbor, FL 34695
Office of Youth Ministry 727-726-3622

Parental Request for Parish Youth Events

INFORMATION ABOUT THE EVENT

EVENT:	
LOCATION:	
DATE(S) & TIME(S):	
PARISH / SCHOOL / SPONSOR:	Espiritu Santo Catholic Church

\$5.00 per person

INFORMATION ABOUT MY YOUTH

NAME OF YOUTH: _____ DATE OF BIRTH: ___/___/___

HOME ADDRESS: _____

NAME OF PARENT / GUARDIAN: _____

WORK PHONE: (_____) _____ HOME PHONE: (_____) _____

MEDIAL INFORMATION: Please list all information pertaining to allergies, diet, special medicine, health conditions or any other information necessary in an emergency situation. Explain fully:

CONSENT AND RELEASE

General: I hereby request and give permission for my youth to participate in the above event. I understand and assume the risk inherent with this event from other parties, but I also understand that all reasonable care and supervision will be exercised to provide for the general well-being of my youth. I, individually and on behalf of my youth named above, do hereby release, covenant not to sue, and save harmless: The Most Rev. Robert N. Lynch, Bishop of the Diocese of St. Petersburg; the above Parish/School; and all employees, agents and volunteers for the event, from any and all claims for any and all harm arising to my youth as a result of their participation in this event.

Medical: I request the Parish/School representatives obtain medical treatment for my youth in the unlikely event of injury or illness during this event and I agree to pay any expenses incurred for such treatment.

Transportation: I hereby consent to such transportation based upon the permission granted **ON THE REVERSE SIDE.**

Parent / Guardian: _____ Date: ___/___/___



Signature

O V E R

REQUEST FOR TRANSPORTATION

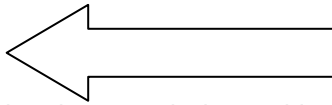
Dear Parent or Guardian: We have the opportunity to participate in an event requiring transportation. Some vehicles may be provided and driven by parents or youth. If so, the following requirements must be observed.

REQUIREMENTS FOR VOLUNTEER DRIVERS

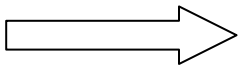
Anyone providing transportation for school/church activities must have a valid Florida drivers license and their own automobile liability insurance with limits of at least \$100,000.00 bodily injury each person, and \$300,000.00 bodily injury each accident, and property damage liability limits of \$50,000.00. The vehicle to be used must be in safe operating condition and occupancy must not exceed the maximum number of occupants for that vehicle. The Diocese of St. Petersburg does not provide insurance coverage, but only as a secondary source to your own insurance, since Florida law requires the owner of a vehicle to be insured. In order to be covered under the Diocesan plan, proof of insurance must be furnished.

I hereby request the following transportation to be used for my youth participating in this event and if driving, I agree to follow the above requirements.

CHECK ONE



- My son/daughter has permission to ride the Church/Charter bus or van for this event.
- My son/daughter may ride as a passenger in a private car driven by a teacher/parent/guardian.
 - YES** – I am able to be a volunteer driver
 - NO** – I am not able to drive for this event
- My son/daughter may drive our car to the event **without any other youth or passenger.**
- My son/daughter may drive our car to the event **AND** may have other youth ride as passengers.
- My youth may ride as a passenger in a private car driven by another youth.



Parent / Guardian: _____ Date: ____/____/____

PROOF OF INSURANCE

Owner of Vehicle: _____

Vehicle Make, Year: _____ Tag No: _____

Insurance Company: _____

Policy No: _____ Effective (from) ____/____/____ (to) ____/____/____

Limits: Bodily Injury _____ Property Damage _____

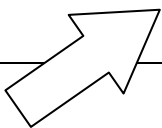
I HEREBY CERTIFY that the above information is true and correct.

Driver: _____ / _____ / _____

Signature

Driver's License Number

Date



O V E R