



St. Barnabas Middle School Youth Ministry
 Registration/Permission Form
 "Lock In"

Friday April 26, 8:00PM – Saturday, April 27 7:00AM

Please turn in \$20 and this signed form to Hannah Hussey (Youth Minister) by Tuesday, April 23 to reserve your spot. Thank you! 882-0724 x224 ~ hhussey@stbindy.org

8:00 pm: Drop off at St. Barnabas Sciarra Center ~ 7:00 am: Pick up at St. Barnabas

I request that my son/daughter, _____, be allowed to participate in the St. Barnabas Youth Ministry event (PLEASE PRINT)

Lock In Friday, April 26, 8:00PM – Saturday, April 27 and hereby release and indemnify Saint Barnabas Church, the parish staff and volunteers, and the Archdiocese of Indianapolis from any and all liability from claims of any kind or nature whatsoever from my teen's participation in this event.

I understand that as parent/guardian I am responsible for providing transportation for my son/daughter to and from this event.

I grant the permission of First Aid to be given to my teen by the adults sponsoring this event and those transporting my teen to and from the program as their judgment deems advisable, and to make the necessary referrals to qualified physicians for treatment of illness or accidents of more serious nature. I understand I will be promptly notified in the event of any serious illness or accident.

Participant's Signature: _____

Parent Name: _____
 (PLEASE PRINT)

Parent Signature: _____ Date: _____

Parent Cell and/or Emergency Phone Numbers: _____

Emergency and Medical Release

Emergency Contact Name(s): _____

Home Phone: _____

Cell Phone: _____

Health Insurance Co: _____

Policy #: _____

Allergies, Dietary Restrictions, or Special Needs:

Name of Medication	Dosage	Frequency	Reason