

Our Lady of Good Counsel Youth Group

Permission Form Event: Frank Runyeon

I, _____, hereby give my consent as the parent of:
_____ to participate in the OLG Youth Group's trip to see Frank Runyeon on March 2nd, 2008. I do hereby agree to release, indemnify, and hold harmless OLG Parish, the Catholic Diocese of Arlington, and its staff and volunteers from any and all liability for any claim or injury or loss sustained by my/our child's participation in this activity.

Participant's Name: _____

Phone #: _____

Parent/guardian Name: _____

Work: _____

Emergency phone numbers: _____

Number where we can reach you while we are on our trip: _____

Family Physician: _____

Phone #: _____

Health Insurance Company: _____

Policy/Group #: _____

Is your child allergic to any medications (please list):

Other allergies: _____

Is your child currently taking any prescribed drugs? _____

In the event of a medical emergency, I hereby give permission to those in charge to request necessary medical treatment for my child, in the event that I cannot be reached at the above listed phone numbers.

Signed (parent/guardian): _____

Date: _____

Cost: \$8

Please fill out the following information if you are able to drive for this event.

_____ I am able to help provide transportation and can take _____ passengers with seatbelts.

Your Name: _____

Home #: _____

Cell #: _____

Work #: _____

Student Name: _____

Grade: _____

For more information: Call the Youth Office at 703-938-2828 x128