



The Diocese of Knoxville
Office of Youth & Young Adult Ministry

PARENTAL /GUARDIAN CONSENT, MEDICAL INFORMATION, AND LIABILITY WAIVER

Participant's Name: _____

Address: _____ Zip _____

Age: _____ Gender: Male ☐ Female ☐ Birthdate ____ / ____ / ____

Emergency Phone: (____) _____

Parent E-Mail Contact: _____ @ _____ . _____

Parish: _____ H.S. Class of 20 _____

T-shirt Size: ☐ Small ☐ Medium ☐ Large ☐ XL ☐ 2XL ☐ 3XL

Note: Not all events include a t-shirt or transportation

Mode of transportation: ☐ Parent/Guardian Vehicle ☐ Adult Chaperone Vehicle

Commercial ☐ Rental car ☐ School bus ☐ Motor Coach ☐ Subway ☐ Train ☐ Airline

I _____ grant my permission for the above named
Print Parent/Guardian Name minor ("participant") to participate in

Diocesan Local National Catholic Youth Conference
St. Dominic Church 2517 N John B Dennis Hwy, Kingsport, TN 37660

from 11 / 18 /2021 to 11/ 20 / 2021

Parent/ Guardian Signature Date

As parent and/or legal guardian, I remain legally responsible for any personal actions taken by the above named minor ("participant"). I agree on behalf of myself, my child named herein, or our heirs, successors, and assigns, to hold harmless and defend the Diocese of Knoxville its officers, directors, employees, agents, chaperons, or representatives associated with the event, from any claim arising from or in connection with my child attending the event or in connection with any illness or injury (including death) or cost of medical treatment in connection therewith, and I agree to compensate the diocese, its officers, directors and agents, St. Dominic Church and the Diocese of Knoxville, its employees and agents and chaperons, or representative associated with the event for reasonable attorney's fees and expenses which may incur in any action brought against them as a result of such injury or damage, unless such claim arises from the negligence of the retreat center/parish/diocese.

Print Parent/Guardian Name Date

Signature _____

Insurance Information

Is the participant insured? Yes ☐ No ☐ If yes, please fill out the information below **from the youth participants** insurance card.

Name of policyholder (whose name the policy is in): _____

Health Plan Carrier (name of insurance co.): _____

Policy #: _____ Member ID: _____ Group #: _____

Family doctor _____ Phone (____) _____

I hereby warrant that to the best of my knowledge, my child is in good physical and mental health. I assume all responsibility for the health of my child with our family's insurance.

Parent/ Guardian Signature Date

In the event of an emergency, I hereby give permission to transport my child to the hospital for emergency medical or surgical treatment. Contact me prior to any further treatment by the hospital or doctor.

Parent/ Guardian Signature Date

Medical Awareness

Immunizations: Date of last tetanus/diphtheria immunization ____ / ____ / ____

Medically prescribed diet: _____

Allergic reactions (medications, foods, plants, insects, etc): _____

Any physical limitations: _____

Any mental health issues: _____

Has participant recently been exposed to contagious disease or condition such as SARS-CoV-2, mumps, measles, chicken pox, etc.? If so, indicate disease or condition and date of exposure: _____

_____/_____/_____

Special Medical Conditions: _____

Prescriptions and Medications

My child is taking medications at present. My child will bring labeled medications necessary. List medications and concise directions for administering such medications, including dosage and frequency: _____

_____/_____/_____

Signature Parent/Guardian Date

Note: Please check, sign and date one (1) of the boxes below

☐ I hereby grant permission for non-prescription medication (such as Tylenol, Advil, throat lozenges, and cough syrup) to be given to my child, if deemed advisable.

_____/_____/_____

Parent/ Guardian Signature Date

☐ No medication of any type whether prescription or non-prescription be administered to my child unless the situation is life-threatening and emergency treatment is required.

_____/_____/_____

Signature Parent/Guardian Date

Diocese of Knoxville Youth Ministry Youth Code of Conduct

1. Language and behavior should exemplify Christian values.
2. Clothing must be appropriate. Prohibited: leggings without top to cover bottom, spaghetti straps, short shorts without bike shorts under, halter-tops, bikini swimwear, pants worn low with underwear showing, and any clothing item found bearing midriffs, cleavage or offensive in reference to tobacco or alcohol products including advertisements will not be allowed. Refusal to wear appropriate clothing could lead to dismissal.
3. The use of drugs, tobacco, vaping, alcohol, fireworks, matches, cigarette lighters, or items that would endanger people, pets, wildlife or property are strictly prohibited.
4. Clothing must be appropriate. Leggings, without top to cover bottom, spaghetti straps, short shorts, halter-tops, bikini swimwear, pants worn low, and any clothing item found bearing midriffs, cleavage or offensive in reference to tobacco or alcohol products including advertisements will not be allowed. Refusal to wear appropriate clothing could lead to dismissal.
5. Inappropriate public displays of affection is not acceptable and will be addressed.
6. Participants must respect the rights and property of others. Neither vandalism nor stealing is acceptable. Financial obligations that result from such behavior will be the sole responsibility of the youth and his/her family.
7. Male and female participants are not to be in each other's sleeping areas without a chaperone.
8. If applicable, participants must wear their nametags at all times.
9. No participants shall leave the premises without the expressed permission of the director.
10. Cell phones and music, game and video game gear are not to be in use during activities, unless otherwise noted.
11. No minor participants are allowed to be driven by another minor participant to, from or during an event unless expressed permission has been given by a parent/guardian to the director.
12. Each participant should be present in all activities of the event. The director will address any infraction.
13. Food and drinks only consumed in designated areas.
14. Participants are to abide by specific regulations pertaining to individual events not stated above.

Note: The coordinating team takes every precaution to provide a safe environment. We are not responsible for the willful misconduct of a young person.

Code of Conduct: I agree that my child should abide by all rules and regulations as outlined in the Code of Conduct. I agree that if my child fails to abide by this code or engages in any infraction deemed by the director to be inappropriate, he/she may be dismissed from this activity and sent home at my expense with no right of reimbursement.

_____/_____/_____
Print Parent/Guardian Name Date

Parent Signature _____

I have read the foregoing and understand the **Code of Conduct** for participants and I will abide by them. In addition, I will abide by all directions given me by the coordinators and adult chaperones. I understand and agree that my parents or guardians will be notified at the time of any infraction requiring my dismissal from this event and that I will be sent home at the expense of my parents or guardian. I also understand that being in possession of any tobacco product, alcoholic beverage, or drug is cause for automatic dismissal from this event and the proper authorities will be notified.

_____/_____/_____
Print Participant Name Date

Participant Signature _____

Audio/Video Photo Release

Promotional Release

I consent to the use of any videos, photographs, audiotapes, or any other visual or audio reproduction (unless otherwise revoked by me in writing and delivered to the CHANCERY and by certified mail, return receipt requested, to: The Diocese of Knoxville 805 S. Northshore Dr., Knoxville, TN, 37919 ATTN: Director of Youth, Young Adult & Pastoral Juvenil Ministry) in which my son/daughter may appear by the Diocese of Knoxville. I understand that these materials, including websites and social media sites, are being used for promotion of the youth ministry of the Diocese of Knoxville which may include recruitment and fundraising efforts.

Social Media Release

The Diocese of Knoxville utilizes today's technology in a positive way to reach out to the youth of the diocese, including Facebook, email, Flocknote and other social media. We may remove any content deemed inappropriate. All communications with any youth through social media programs by anyone representing the diocese may be made available to any parent upon request. If you do not allow your son/daughter to text, Facebook, or use other social media, there will be no expectation that they do so in order to participate in certain youth ministry events. However, the diocese cannot guarantee that photos, videos or other communications of your son/daughter from diocesan and/or parish events will not be uploaded to a social media site.

_____/_____/_____
Participant Signature Date

_____/_____/_____
Parent/Guardian Signature Date