

1. Consent: I grant my permission for my child to attend and participate in **Gr. 5-8 Lock-In** (herein referred to as "Activity") to be held at **St. Anne School, Dixon, IL** (SCHOOL SPONSORED and/or CHURCH SPONSORED ACTIVITY) on **11/8/2019** from **7-11pm**

2. Student Cooperation: My child agrees to abide by all the rules of aforementioned Activity and to obey the staff in charge of this Activity. The Parish, School, and Diocese will not be liable for my child's failure to cooperate and/or to abide by the rules. Any infraction of the rules may result in the immediate dismissal of my child from the Activity at my expense and without refund to me of the costs paid for the Activity.

3. First-Aid/Emergency Treatment: I authorize the School, Parish, and Diocese and its employees and volunteers to administer first-aid to my child if deemed necessary and appropriate to preserve the life, limb or well-being of my child. I authorize the Parish, School, and Diocese to contact and engage medical personnel and arrange for emergency treatment of my child, including transportation for medical, dental, surgical or hospital care or diagnosis, and I consent to that treatment for my child. I agree that I am financially responsible for such medical treatment.

4. Administration of Medication provided by parent/guardian of child: If my child needs to take prescription or non-prescription medication during this Activity, I have provided the medication in its original container. I give permission to an adult employee or adult volunteer to administer the medication or assist in the administration of the medication to my child in the dosage prescribed by the prescription or, for non-prescription medication, the dosage recommended on the container by the manufacturer. If there are explicit instruction for this medication,

I state them here:

5. Release: I hereby release and discharge The Diocese of Rockford and its Bishop, and the Parish and School, and the officers, directors, employees, and volunteers of same, from all claims for personal injuries or property damage that I or my child may suffer while my child is attending and/or participating in the Activity, unless the injuries or damage resulted from willful misconduct of the Diocese, the Parish, the School or its employees. If I have provided medication for my child to take during this Activity, I hereby release and discharge The Diocese of Rockford ad its Bishop, and the Parish and School, and the officers, directors, employees, and volunteers of same, from all claims for personal injuries or property damage that I or my child may suffer as a result of the administration of or lack of administration of or assistance in or lack of assistance in the administration of said medication to my child, whether by my child and/or an adult employee and/or an adult volunteer; unless the injuries or damage resulted from willful misconduct of the Diocese, the Parish, the School or its employees.

Date: _____

Parent/ Guardian's Signature:

Printed Name:

CONSENT FORM FOR GR. 5-8 LOCK-IN

Please fill out BOTH front and back

I hereby give consent for my child/children, _____ to attend the events described below. I understand that these events will take place on the school grounds and that my child will be under supervision of the designated school employees on the stated date. I further consent to the conditions stated below for participation in this event.

STUDENT NAME

PARENT NAME

STUDENT SIGNATURE

PARENT SIGNATURE

PARENT CONTACT NUMBER(S)

PARENT NAME (IF NOT ST. ANNE)

PLEASE RETURN FORM BY: WEDNESDAY, NOVEMBER 6, 2019

CUT HERE AND RETURN TOP PORTION - KEEP BOTTOM OF FORM FOR YOUR INFO.

PARENT PERMISSION FORM FOR ST. ANNE GR. 5-8 LOCK-IN

Dear Parent of Legal Guardian:

Your son/daughter is eligible to participate in a school-sponsored activity. This activity will take place under the guidance and supervision of employees from St. Anne School. All visitors are expected to follow St. Anne School conduct expectations. A brief description of the activity follows.

NAME OF EVENT: ST. ANNE GR. 5-8 LOCK-IN

DESTINATION: ST. ANNE SCHOOL

DATE & TIME OF EVENT: NOVEMBER 8, 2019. DROP OFF, 7-7:30PM, PICK-UP, 10:30-11PM

DESIGNATED SUPERVISOR OF ACTIVITY: MR. ARMATO, HOME & SCHOOL VOLUNTEERS

STUDENT DRESS: CASUAL & APPROPRIATE

STUDENT COST: ST. ANNE = FREE, STERLING DEANERY = \$10, NON-DEANERY GUEST = \$15