

Permission Slip for JHYM LATE NIGHT SOCIAL

GENERAL PERMISSION FORM

I grant permission for these family members:

Name	Grade
_____	_____
_____	_____

to participate in St. Jude's JHYM LATE NIGHT SOCIAL on Friday, January 12, 2018 from 7:30-11:30 pm (drop off & pick up at Franciscan Hall entrance).

I hereby release and indemnify my parish, St. Jude Church, its staff, volunteers, and the Diocese of Joliet from any and all liability arising from claims of any kind or nature whatsoever from my family's participation in this event.

Videotaping and Still Photographs

Video and still photographs may be taken during this event. This authorization form constitutes permission for my child's participation in the videotape and/or still photographs, which may be used for future promotional efforts, including the Diocese of Joliet website.

Code of Behavior

You are representing St. Jude in our community during this event and we expect you will represent us well. We expect that you will display mature, safe, and responsible behavior.

Some Expectations:

- All participants are expected to arrive on time.
- All participants are expected to demonstrate common courtesy and respect at all times. Inappropriate language/behavior will not be tolerated.
- Socializing should always be done in public areas.
- Dress should reflect the value of modesty. Writing on clothing should reflect Christian values.
- The possession or consumption of any alcoholic beverage and/or possession/use of any illegal drug is not permitted.
- Smoking is not permitted.
- Weapons and/or drug paraphernalia are not allowed.
- If under the age of 18, prescription drugs need to be given to an adult from your parish for storage and distribution.
- Infraction of these rules can mean immediate dismissal with no refund. Participants will be responsible to local authorities as well.

I understand and agree to this Code of Behavior. I also understand and agree that at the time of an infraction requiring my dismissal, I am responsible for my removal from the premises and any costs involved.

If under the age of 18, I also understand and agree that my parents or guardian will be notified at the time of an infraction requiring my dismissal. My parents or guardian will be responsible for my removal from the premises and any costs involved. Date: _____

Youth Signature: _____

Youth Signature: _____

Youth Signature: _____

Parent/Guardian Signature: _____

MEDICAL PERMISSION FORM

I grant permission for the administration of First Aid to my family members by the people in charge of the event, and those transporting my child to and from the event as their judgement deems advisable, and to make the necessary referrals to qualified physicians for the treatment of illness or accidents of a more serious nature. I understand I will be promptly notified in the event of any serious illness or accident and prior to any major surgery, except when delay in such communication would endanger life. In the case of a medical emergency, I understand that every effort will be made to contact the parent/guardian of the participant. In the event that I cannot be reached, I hereby give permission to the physicians selected by the adult staff to hospitalize, secure proper treatment for, and to order injection, anesthesia, or surgery if deemed necessary for my child.

Family Insurance Information

Policy in the name of: _____
 Insurance Company: _____
 Policy Number: _____
 Identification Number: _____
 Authorized Physician: _____
 Phone #: _____

Name: _____ Birth Date: _____
 Allergic to medication/other? NO YES (circle one)
 If yes, please describe: _____
 Medication(s) presently taking: _____
 Participant's Cell Phone: _____

Name: _____ Birth Date: _____
 Allergic to medication/other? NO YES (circle one)
 If yes, please describe: _____
 Medication(s) presently taking: _____
 Participant's Cell Phone: _____

Parent/Guardian Signature: _____

Family Address: _____
 City: _____ State: _____ Zip: _____
 Home Phone: _____ Work Phone: _____
 Cell Phone: _____
 In case of Emergency, contact: _____
 Phone #'s: _____

All 7th & 8th Grade teens are invited!

- If you want to go, you MUST:**
- ★ Register each participant on-line by Tuesday, January 9th stjudes.org/JHYM
 - ★ Turn in this SIGNED permission slip to the Parish Office by Tuesday, January 9th

Parents:

We need your help to make this a fun, safe & successful event! If you have been through PGC, would you please sign up to help:

__6-9:30 pm __9-11:45 pm __either one

Questions? Contact Jenny Krumdrick 815-514-0051

Cost: \$3 at the door

Covers pizza & beverages

7th & 8th grade FRIENDS are welcome too!

Gals bring sweet snacks

Guys bring salty snacks to share

Teens may be picked up early if parent attaches a signed note to permission slip and personally signs them out.