



Diocese of Metuchen
Teen Permission Slip



Activity: _____ Location: _____ Date: _____

PLEASE PRINT CLEARLY

Parish Town: _____ Parish Name: _____

First Name: _____ Last Name: _____

Home Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

DOB: _____ Age: ___ Sex: M ___ F ___ Grade ___ School: _____

Mode of Transportation: _____

Departure Time: _____ Return Time: _____

Parent/Guardian Name: _____ Home Phone: _____

Parent/Guardian Work Phone: _____ Cell Phone: _____

Emergency Contact: _____ Best Phone to be reached during activity: _____

Health Insurance Company: _____ Policy & Group Number: _____

Family Physician: _____ Phone: _____

Medical Conditions to be aware of: (Circle) Seizures, Asthma, Migraines, and Diabetic Other: _____

Allergies: Peanut, Latex, Dyes, Other: _____ Medication Allergies: _____

List all current medications and reason: _____

List Dietary Restrictions: _____

Are immunizations up to date? Yes No Date last tetanus immunization: _____

Parent /Legal Guardian's Signature: _____ Date: _____

Make checks payable to _____. Do not send cash in the mail. Registration will not be accepted without a completed registration form and payment! Notary required **only** if out of state activity.

For additional information contact: _____

Parish Youth Minister: _____ Youth Minister Cell During Activity: _____

For International Travel Only:

Exact Passport Name: _____

Date Issued: _____ Passport Number: _____ Expiration: _____

Attention Parents or Guardians - Please sign both sides



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Parent/Guardian: Please read carefully and sign below.

I/we consent to my child, _____ (“my child”), participating in the above described activity and consent to the mode of transportation as indicated. I/we specifically waive and release any and all claims of any nature which I/we may have now or in the future against the above named parish and/or school, the Diocese of Metuchen, their representatives, employees, agents and assigns (including, but not limited to, staff and adult supervisors) arising out of, related to, or connected in any way with the above described activity including, but not limited to, claims that may be derived from any accident or injury sustained by my child or damages or loss to property in route to, during, and/or returning from the activity.

AUTHORIZATION FOR MEDICAL TREATMENT

Should emergency medical treatment be necessary and I/we cannot be reached immediately, I/we authorize the delegated agents of the above-named parish to consent to medical or surgical treatment of an emergent or non-emergent nature, including in-patient or out-patient hospitalization, to be rendered to my child under the general or special supervision and advice of a physician, surgeon or dentist. Such consent may include, but it not limited to, medical or surgical diagnosis or treatment, diagnostic tests, blood tests, x-rays, transfusions, intravenous treatments, administration of medication or anesthetics, and any related procedures that may be deemed advisable or necessary. It is understood that this authorization is given in advance of any specific diagnosis, treatment or hospital care being required, but is given to provide authority and power to the delegated agents of the above-named parish to give specific consent to any and all such diagnosis, treatment, or hospital care which the aforementioned physician, surgeon or dentist, in the exercise of his/her best judgment, may deem advisable. I/we understand that I/we assume all financial responsibility for the delivery of such care at the time that such care is provided by the agency, hospital, or facility. I/we further understand that Diocesan and/or parish representatives are NOT permitted to dispense medication—unless parents previously discussed a child’s need for a specific medication also noted on this form. In the event that my child requires medication during the above described activity, I/we understand that my child must be trained to self-administer medication or have a parent in attendance to administer medication.

PHOTO RELEASE

I/we hereby grant to the Diocese of Metuchen and its parishes, schools and assigns, the irrevocable and unrestricted right to use, reproduce and publish photograph(s) or video(s) of my child, including their image and likeness for diocesan, parish or school publications, advertising, or website(s), or any other purpose and in any manner and medium; to alter the same without restriction; and to copyright the same. I/we hereby release The Diocese of Metuchen and its trustees, officers, employees, agents, legal representatives, and assigns from any and all claims, actions, and liability of whatever nature and relating to the use of said photograph(s) and/or video(s).

DISCIPLINE / TRANSPORTATION OR DAMAGE COSTS

I/we agree that I/we have read and fully understand the *Office of Youth & Adult Ministry’s Policies and Rules of Conduct* (see page 3) and I/we agree to adhere to them. I/we agree to respect the rights and property of others and further understand that vandalism, stealing or insubordination will not be tolerated. I/we assume all responsibility for any and all financial obligations that result from any such behavior or the violation of the Policies and Rules of Conduct. Should it be necessary for my child to return home due to medical reasons, disciplinary actions or otherwise, I/we assume all responsibility and transportation costs.

Parent/Guardian Name (Print): _____ Date: _____

Signature of Parent/Guardian: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip Code: _____

During the hours of this trip/activity I can be reached at (phone/cell phone number) _____

FOR OUT OF STATE ACTIVITY ONLY:

In witness thereof, the undersigned, intending to be legally bound hereby sets their hand and seal the date written below.

Notary Signature (REQUIRED): _____ **Date:** _____



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Youth Participants will

- Show Christian consideration, sensitivity and respect to everyone and to the property around them through language, dress and behavior
- Attend all scheduled activities, arriving promptly and staying for the entire event
- Refrain from inappropriate touching and verbal harassment
- Respect other persons and/or property
- Adhere to chaperones directions
- Be aware of noise levels in lobbies, hallways and sleeping areas (if applicable), especially later in the evening
- Report problems of any kind to a trusted adult

Youth Participants will not

- Possess weapons of any kind
- Purchase, possess, consume or distribute alcohol or illegal drugs
- Engage in any form of sexual activity or peer sexual harassment or verbal harassment
- Purchase, download, possess, view or distribute pornography
- Visit or gather in hotel rooms with the opposite gender
- Act in any manner that could result in injury or property damage

Youth participants will be aware of what are and are not appropriate behaviors in terms of relationships between adults and youth, with their peers. The following behaviors are generally considered **appropriate** at an event

- Handshakes, high-fives and hand slapping side hugs, shoulder to shoulder or "temple" hugs
- Praise for a job well done (not regarding physical attributes)
- Arms around shoulders
- Holding hands while walking with younger minors
- Sitting beside young minors
- Kneeling or bending down for hugs with younger minors
- Holding hands during prayer
- Pats on the head (when culturally appropriate)
- Touching hands, faces (usually in context of a blessing), shoulders and arms of minors, arms around shoulders

The following behaviors are generally considered **inappropriate** at an event

- Kisses on the mouth
- Inappropriate or lengthy embraces
- Touching knees or legs of other participants
- Wrestling with others
- Being in or on a bed with an adult
- Holding anyone on the lap who is capable of sitting on their own
- Any type of massage given by adult to minor
- Any form of unwanted affection or peer sexual harassment
- Piggyback rides
- Any type of massage given by minor to adult or another minor
- Touching bottom, chests or genital areas
- Compliments or put downs that relate to physique or body development
- Going to an isolated area away from the group, or being taken to an isolated area by an adult or peer
- Showing affection in isolated areas of a facility such as bedrooms, restrooms, bathrooms, closets, staff-only areas or other private rooms

Youth and parents understand that failure to agree to and abide by the Diocesan Youth Code of Conduct will bar youth from participation in any diocesan/parish sponsored youth event.

Youth Participant Sanctions for Non-Compliance

Group leaders, chaperones and/or parents bear the responsibility for sharing this information with youth participants. Failure to do so does not excuse any inappropriate behavior on the part of youth participants nor does it affect the Diocese of Metuchen's ability to levy sanctions. If a young person violates the Diocesan Code of Conduct, any or all the following sanctions may be implemented:

1. Reporting of misconduct to local authorities, if the violation in any way violates local ordinance or laws.
2. Dismissal of the youth from the diocesan event or program by requesting that the group leader remove the youth from the event (whereby it would become the responsibility of the group leader/chaperone/parent to ensure timely, accompanied, and safe transportation home).