

FLAME I Retreat 2020

PERMISSION & AUTHORIZATION FORM FOR MEDICAL TREATMENT

I/We, the parent(s) of _____ request that Holy Family Teen Faith program allow my/our child to participate in

Event: FLAME I Retreat

When: 8:00am Saturday, February 29, 2020 – 11:30am Sunday, March 1, 2020

Place: Loyola University Retreat & Ecology Center, Woodstock, IL

I hereby release and indemnify Holy Family Parish, its staff and its volunteers and the Catholic Bishop of Chicago, a corporation sole, from any and all liability arising from claims of any kind or nature whatsoever from my child's participation in this event.

In the event that the undersigned or my (our) authorized physician, cannot be reached, and in the judgment of a responsible person accompanying the group, or other appropriate staff member, there is a necessity for immediate examination and/or treatment of my (our) child, I/We hereby authorize any of the aforesaid people to obtain for my child such medical services as are deemed necessary.

Home Phone Number _____ Other number (if applicable) _____

Family Physician _____ Phone Number _____

Name of Insurance Co. _____ Policy Number _____

Person to contact in case of emergency (if unable to reach parent):

Name/Relationship

Phone Number

Parent(s) Name(s)

Specific medical allergies, food allergies, chronic illnesses and other conditions. Please list any & all medications that your child may take during the retreat.

Roommate requests (Rooms are double occupancy. Please list two choices for roommates) Please note that this is a just a request however we do our best to honor them if possible.

1. _____ 2. _____

___ Check here if you would be willing to assist at sign in the morning of the retreat (7:45-8:30am)

___ Check here if you are available to assist in the Teen Faith office with retreat prep the week before the retreat

Parent/Guardian Signature

Date

I understand that by signing my teen up for this retreat, he/she will attend the retreat in its entirety, from 8am on Saturday until 11:30 am on Sunday. I acknowledge that there is no coming late and no leaving early.

_____ parent initials