ADULT

ABLAZE 2015 Registration Form and Liability Release Form B

REGISTRATION FEE: \$25.00 per ADULT

*Includes lunch, dinner on Saturday *Does not include housing or transportation

- If you are attending as part of a Parish/School/Group, submit all completed forms and fees <u>TO YOUR GROUP</u> LEADER to register as a group.
- Group Leader Step 1: Complete electronic Form C, listing all member of your group. Form C is available at www.ablazeretreat.com. Complete and email to info@ablazeretreat.com. Step 2: collect ALL Registration Forms for your entire group (youth and adults) and submit them together with ONE CHECK for your parish/group, payable to ABLAZE 2015. Do not send individual checks if registering with a group. See mailing address bottom of this page.
- 3 Required Forms for <u>EACH</u> Adult (Adult Participant is any Youth Minister, Group Leader, Chaperone, Volunteer, Parent). *All forms are available at www.ablazeretreat.com*:

(1) Form B (this form, front/back) (2) Adult Code of Conduct (3) Adult Travel Form
These forms MUST be completed in addition to any forms that might be required by your Parish/Group.

If you are attending from outside the Diocese of Dallas, Safe Environment compliance letters must be included with the Forms and Fee(see back of this page for more details).

Participant Name			Date of Birth	/		Gender: F	M
Circle Participant's Status:	* Chaperone	*Parent * Volunteer	Are you 21 or older? Y N		Day		
Address							
City			State		Zip		
Cell Phone ()		_Parish/Group		_ Parish Phone			
L	iability Rele	ease Form Below M	MUST be completed by	ALL Participar	nts.		

Consent to Participate Liability Release Form Release of ALL Claims

Name of Activity: ABLAZE 2015 Retreat Location: St. Monica Parish Family Center Telephone: 214.434.1553 Date of Activity: January 30, 31, February 1, 2015

I understand that as parent(s)/guardian(s)/conservator(s), I remain legally responsible for any personal actions taken by my son/daughter. We recognize the inherent risk associated with the various activities that my son/daughter will be participating in. I/We, the undersigned, do hereby agree on behalf of myself, my son/daughter named herein, our heirs, successors, and assigns to release, forever discharge, indemnify, defend, and hold harmless St. Monica Parish, the Roman Catholic Diocese of Dallas, and their respective members, officers, directors, employees, chaperones, agents and/or volunteers from and against any and all claims, liability, demands, lawsuits and expenses of any kind (unless due to the Sole or Gross NEGLIGENCE of the Parish as determined by a Trier of fact) arising from illness, injury, death, or property damage of any kind whatsoever which may be incurred or suffered by the undersigned and/or participant (if participant is under 18, 18 or older), and the cost of medical treatment therewith, arising from or in any way connected with my son/daughter traveling to, participating in and/or attending the activities noted above.

The undersigned further agree to indemnify and hold the Roman Catholic Diocese of Dallas, St. Monica Parish, and their respective members, directors, employees, volunteers and agents (collectively, the "Indemnities,") harmless from and against any and all claims, demands, actions, lawsuits, and liabilities, including attorney fees and expenses and costs sustained by the Indemnities as a result of negligent, willful or intentional acts of the undersigned and/or participant (if participant is 18 or under, 18 or older). In the event any legal action is taken by either party against the other party to enforce any of the terms and conditions of this release, it is agreed that the unsuccessful party to such action shall pay to the prevailing party therein all reasonable court costs, reasonable attorneys' fees and expenses incurred by the prevailing party.

If participant is under 18 years of age, in consideration for allowing our child to participate in this activity, I (we) the parent(s)/guardian(s)/conservator(s) of the above named child, grant permission for my son/daughter to travel and participate fully in the ABLAZE 2015 Retreat activities and functions. Further, should it be necessary for the participant to return home due to medical reasons, disciplinary action or otherwise, I (we) assume all responsibility and transportation costs.

This form must be PRINTED AND SIGNED by all participants.

If participant is under 18, parent or legal guardian must sign.

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RELEASE FOR ADULT	PARTICIPANTS	S AGED 18 (out of high school) an	d over	
Name (please print)	IMPORTAN	Signature (print this form to sign) Signature (print this form to sign) Signature (print this form to sign)	Cell phone f this Form.	 Date

All forms are available in English and Spanish: www.ablazeretreat.com

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Audio/Visual Recording and Photog	raphy Consent for Adults: (Signature required)	
On occasion, video recordings, audio re and diocesan sponsored activities. Thes and other printed media. I release the st	ecordings, photographic slides, and photographs ar se are utilized in newsletters, websites, event promo aff and volunteers of as from any liability connected with the use of my p	otion, advertisements (parish)
Name (please print)	Signature (print form to sign)	Date Signed
Retreat who have not submitted the EXCEPTIONS. 1. Complete and sign your own AB Submit ONE form per participant. It is submitted together, with ONE CH is secure environment for minors, criminal background check. You as follows: • Members of the Diocese of Dallad certification process required by the Safe Environment Screening procesure Upon receiving this form, the Diocetabase of the Diocese of Dallas not be admitted to the Retreat. Note the Members of other dioceses: Attackers Attackers and the completed the required background check through your participated to the participated background check through your participated background check through your participated in the complete of the participated background check through your participated backgro	cocumentation PRIOR TO the Retreat. Those arriving following documentation will NOT be admitted by ALAZE 2015 Adult Form B Liability Release/Registrate Downloadable forms: www.ablazeretreat.com The to your Group Leader so that all forms/fees for your HECK submitted per parish/group. CB's Charter for the Protection of Children and Your own Diocesan policies and requirements for provincluding the completion of any diocesan required in CANNOT be admitted unless compliance has been as: You must be fully compliant and CURRENT with the process of Dallas, including completion of all Diocess and the Diocese of Dallas, including completion of all Diocess and the Complete of Dallas will confirm that your name appears in as current and fully compliant. Adults not listed as cure exceptions. The Acceptions of the USCB, as implemented by the Diocesan training, including the date of the training trish/Diocesa, including the date the background check of Diocesan training, including the date of the training trish/Diocesa, including the date the background check of CHAPERONE ASSIGNMENT. The minor, age 17 and younger, must have a designated Chaperner of 1 to 14 minors. If you have more than 14 minors in your group of 1 youth in your group. (Group with 1 to 14 minors = 2 Chaperinors = 4 Chaperones. Group with 29 to 35 minors = 5 Chaperones = 7 Chaperones, etc.) Petreat hours ONLY WITH written permission of parent/gual parent must come inside pick up minor. The ABLAZE 2015 Retreat with your group at all times. Names of minors chaperoned by person name and the ABLAZE 2015 Retreat with your group at all times. Names of minors chaperoned by person name and the ABLAZE 2015 Retreat with your group	and at the ABLAZE 2015 and to the Retreat. NO atton Form (both sides). The same and training and a current and a c
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For Registration Committee Use Only:		
SAFE ENVIRONMENT Compliance Verific	ed: Yes No Date:	

Notes: