

**DIOCESE OF GRAND RAPIDS**  
**CROSSROADS CATHOLIC PARISHES**  
[St. Pius X, Holy Redeemer, St. Sebastian, Holy Name of Jesus]

**Parent/Guardian Permission Form for Children's/Youth Participation**

Dear Parent or Legal Guardian:

Your child is eligible to participate in **CHASTITY FORCE**, sponsored by the Crossroads Parishes and being held at St. Pius X Catholic Parish. This activity will take place under the guidance and supervision of leaders from Chastity Force and St. Pius X Parish. A brief description of the activity follows:

Name of Event: **CHASTITY FORCE**

Destination: **ST PIUS X CATHOLIC PARISH, 3937 Wilson Ave SW, Grandville, MI**

Date of Event: **SATURDAY SEPTEMBER 11, 2010**

Time of Event: **3:00 pm to 9:00 pm**

Transportation: **N/A – Participants must provide their own transportation**

If you would like your child to participate in this event, please complete, sign, and return this entire form to Chastity Force or the St. Pius X Formation Office **on or before September 11, 2010**. As parent or legal guardian, you remain fully responsible for the actions and conduct of your child.

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**Statement of Consent**

I hereby consent to participation by my child, \_\_\_\_\_, in the event described above scheduled for **September 11, 2010**. I further consent to the conditions stated above on participation in this event.

In consideration of my child being allowed to participate in this event, I agree to waive and release, and indemnify and hold harmless the Diocese of Grand Rapids, St. Pius X Parish, Holy Redeemer Parish, St. Sebastian Parish, Holy Name of Jesus Parish, and all affiliated organizations, their employees, agents, representatives, and volunteers from any and all claims I or my child may have, excluding claims for intentional misconduct or gross negligence, arising from or relating to my child's participation in this event.

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Print Parent/Guardian Name

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Print Parent/Guardian Signature

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Date

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Health Insurance Company

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Policy #

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Emergency Contact

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Phone Number