

**ST. DOMINIC CYO, NEW ORLEANS, LOUISIANA
PARENTAL/GUARDIAN CONSENT FORM AND LIABILITY WAIVER**

Participant's name: _____

Birth date: _____ Sex: _____

Parent/Guardian's name: _____

Home address: _____

Student's cell phone: _____ Home phone: _____

Mother cell phone: _____ Father cell phone: _____

I, _____, grant permission for my child, _____, to participate in this parish activity that may require transportation to a location away from the parish site. This activity will take place under the guidance and direction of parish employees and/or volunteers from St. Dominic Parish. A brief description of the activity follows:

Type of event: CYO Cabbageball League

Location(s): St. Dominic, St. Edward, St. Benilde, other parishes per schedule

Individual in charge: Johnny Smestad, Courtney Jansen, various CYO alumni

Duration of activity: See Archdiocesan game schedule; June – July 2024

Mode of transportation to and from event: on your own

As parent and/or legal guardian, I remain legally responsible for any personal actions taken by the above named minor ("participant").

I confirm that there are no necessary changes to the Medical Information Consent form for my child that I previously submitted. If there are any necessary changes, I will complete another Medical Information Consent form.

I agree on behalf of myself, my child named herein, and my spouse, our heirs, successors, and assigns, to indemnify, hold harmless, and defend St. Dominic Parish and The Roman Catholic Church of the Archdiocese of New Orleans, their members, directors, officers, employees, agents and representatives associated with the event arising from or in connection with the negligence and/or intentional acts of my child.

Signature: _____ Date: _____