

**COLUMBUS DIOCESAN OFFICE OF YOUTH AND YOUNG ADULT MINISTRY  
REGISTRATION FORM**

*Men's and Women's Overnight Retreat*

Name of Participant \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ ( \_\_\_\_\_ ) \_\_\_\_\_

E-Mail \_\_\_\_\_

Parish Holy Spirit      Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_      Male       Female

o      Grade \_\_\_\_\_

Name of Adult Leader: Kate Allwein

**EMERGENCY CONTACT INFORMATION**

Parent or Guardian \_\_\_\_\_

Address \_\_\_\_\_

Phone(s) \_\_\_\_\_

Chronic Conditions (e.g. Allergies, Epilepsy; Diabetes) \_\_\_\_\_

Medications \_\_\_\_\_

Medical Insurance \_\_\_\_\_ Policy Number \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_ ( \_\_\_\_\_ ) \_\_\_\_\_

Member's Name \_\_\_\_\_ Phone \_\_\_\_\_ ( \_\_\_\_\_ ) \_\_\_\_\_

Family Doctor \_\_\_\_\_ Phone \_\_\_\_\_ ( \_\_\_\_\_ ) \_\_\_\_\_

**RELEASE AND INDEMNIFICATION AGREEMENT**

Name of Activity Overnight Retreat

Location : Bethesda Healing Ministry

Dates of Activity February 28, 2009

A. As the above-named participant, I hereby register for and commit to attend Overnight Retreat.

I further agree to the terms of this Release and Indemnification Agreement, and I agree to comply with the Code of Behavior set forth below.

B. As a parent or guardian of the above-named participant, I give my permission for my child or ward to register for and attend the activity.

C. The undersigned release from all liability, and indemnify and hold harmless Holy Spirit Parish, the Diocese of Columbus and any employee, agent or representative thereof from any and all liability, actions, causes of actions, claims, judgments, costs or expenses, arising out of or in any way related to injury, illness or loss incurred by the participant while participating in or traveling to or from this activity.

**CODE OF BEHAVIOR**

1. Participants must stay and participate in the entire event. Participants may not leave the premises unless accompanied by an adult leader, parent, or legal guardian.
2. The possession or use of alcohol, tobacco, drugs, or weapons of any kind is not permitted.
3. Foul language is not tolerated.
4. Participants must heed any and all directions of activity staff.
5. Participants must respect the rights and property of others. Damage to or defacing of property will be the financial responsibility of the participants involved and the participant's parents/legal guardians...
6. Failure to abide by this Code of Behavior may result in a request to parents/legal guardians, to transport offending participants from the premises, and the parents/legal guardians shall immediately comply with the request.

**I HAVE READ AND UNDERSTAND ALL  
CONTAINED IN THIS AGREEMENT**

Participant's Signature \_\_\_\_\_ Date \_\_\_\_\_  
\_\_\_\_\_

Parent/Legal Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_  
\_\_\_\_\_