

# Middle & High School Youth

## You are invited to April's Monthly Youth Event

**Date:** Saturday, April 17, 2010

**Mass:** 4:30 pm

**Activity:** Roller Skating, St. Mary's Roller Rink

**Meal:** Pizza, other fixings and soda provided

**Time:** Following 4:30 Mass until 8:00 pm

**Price:** \$8.00/person

Come Join Us  
For a Night of Food, Fun, Fellowship and



Roller Skating



### *Extras:*

**Chaperons are needed:** I will need 2 adults per car who can also be on hill or in chalet  
**Help with Meal:** Pizza & Soda will be provided through their concessions; help from anyone willing to add to the meal is greatly appreciated

*RSVP By: Friday, April 16, 2010*

*To RSVP or Questions: contact Ann at: 469-1329 or [aherally@new.rr.com](mailto:aherally@new.rr.com)*

*Scroll down for*

*Permission Slips and Emergency Contact/Media Release (If this is your first time coming)*

**MAIL THIS WITH CHECK TO:  
ANN HERALY  
2782 HELSINKI ROAD  
GREEN BAY, WI 54311**

**OR DROP OFF AT PARISH  
OFFICE IN AN ENVELOPE  
ATTN: ANN HERALY**



*Catholic Community*

**PARENTAL/GUARDIAN CONSENT FORM & LIABILITY WAIVER  
(Ref. Policy 5030)**

**Participant's Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Sex:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Parent/guardian's Name:** \_\_\_\_\_

**Home Address:** \_\_\_\_\_

I, \_\_\_\_\_, request that Prince of Peace Catholic Community to allow my  
(Parent or Guardian Name)

son/daughter: \_\_\_\_\_ (child's name) 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 & direction of parish employees and/or volunteers from Prince of Peace Catholic Community.

**A brief description of the activity follows:**

**Date:** April 17, 2010

**Activity/trip:** St. Mary's Roller Rink

**Cost to student:** \$8.00/Skater (Make checks payable to: Prince of Peace)

**Purpose of Trip:** Fun & Fellowship

**Duration of Activity:** Following 4:30pm Mass– 8:00pm

**Mode of transportation:** Private Vehicles

**Individual(s) in charge:** Ann Heraly (469-1329)

As parent and or legal guardian, I remain legally responsible for any personal actions taken by the above named minor ("participant"). I agree on behalf of myself, my child named herein, or our heirs, successors, and assigns, to hold harmless and defend Prince of Peace Catholic Community, its officers, directors, agents, the Catholic Diocese of Green Bay, coaches, chaperons, or representatives associated with the activity for reasonable attorney's fees and expenses arising in connection therewith.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**(Parent/Guardian)**



Catholic Community

## Youth Ministry Emergency Information Form

Family Name: \_\_\_\_\_

Student Name	Date of Birth	Grade

Parent/Guardian Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Alternative Contact Person	Relationship	Phone Number
1.)		
2.)		

Physician's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Preferred Hospital: \_\_\_\_\_

Unusual Health Conditions We Should Know About: \_\_\_\_\_

\_\_\_\_\_

If emergency treatment is required, and the parents/guardians/alternative emergency person listed cannot be reached immediately, your signature empowers the parish authorities to exercise their own judgment in calling the physician indicated above, or to have the child transported to a hospital emergency room. Likewise, your signature below authorized the release of medical records pertinent to such an emergency room visit. *This is a general authorization and is not sufficient for the release of confidential information protected by Federal Law.*

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_



Catholic Community

## PROMOTIONAL/MEDIA RELEASE

(Ref. Policy 5025)

**Prince of Peace Youth Ministry** may reproduce or participate in videotape, motion picture, audio recording, web posting or still photograph productions that involve the use of students' names, likeness or voices. Such productions may be used for educational or exhibition purposes by Prince of Peace Youth Ministry and may be copied, copyrighted, edited and distributed by Prince of Peace Youth Ministry.

News media, including representatives of television, radio, newspapers and magazines, also may be permitted on school/parish property and may take notes, still photos, sound recordings and/or moving pictures that may include your child. These items may appear or be used in new or feature stories by print, television, website posting or radio media.

By completing the form below and returning it to the Prince of Peace Youth Ministry, you are giving consent. If you have any questions, please contact the Prince of Peace Youth Ministry Leaders, Ann Heraly at 469-1329 or Kathy Walczyk at 469-1891.

I, \_\_\_\_\_, the undersigned, do hereby consent that  
(Please Print – Parent/guardian)

Prince of Peace Youth Ministry may use the name, portrait, or other likeness of my child for news releases, media and promotional activities.

This consent is renewed at the beginning of the current school year.

**Student's Name**

**Grade**

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**(Parent/guardian) Signature:** \_\_\_\_\_

**Date;** \_\_\_\_\_