

THE STONE THAT  
THE BUILDERS REJECTED HAS  
BECOME THE  
CORNERSTONE  
*1 Peter*  
2:6-7

# MIDDLE SCHOOL RETREAT

DATE: Saturday, March 21, 2020

TIME: 9:30AM - 8:00PM

PLACE: Our Lady of Czestochowa, St. Hyacinth Site  
2307 S. Monroe St., Bay City 48708

COST: \$30 Scholarships available  
See your youth minister for registration details

**Life seem a little shaky?**

**Wonder if there is a way to stop it?**

**Join us for this one day retreat as we take a closer look at how to**

**GET A STEADY FOUNDATION**

## Middle School Retreat Registration Form

**Our Lady of Czestochowa Parish, St. Hyacinth Site  
(2307 S. Monroe St, Bay City)**

**March 21, 2020; 9:30 a.m. – 8:00 p.m.**

### SECTION A – Registration Information and Statement of Consent

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Street Address: \_\_\_\_\_ Parish: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_ Grade: \_\_\_\_\_

Phone number: \_\_\_\_\_ Cost: \$30  Enclosed  Bill parish

I hereby consent to participation by my child \_\_\_\_\_, in the event described above. I understand that this event will take place away from the school/parish grounds and that my child will be under the supervision of the designated school/parish employee/volunteer on the stated dates.

In consideration of my child being allowed to participate in this event, I agree to indemnify and hold harmless and defend the Catholic Diocese of Saginaw, Our Lady of Czestochowa Parish, any and all affiliated organizations, their employees, agents, and representatives, including volunteer and other drivers, from any and all claims, including negligence, arising from or relating to my child's participation in this retreat. This indemnification and hold harmless and defense agreement does not apply to claims for intentional misconduct.

\_\_\_\_\_  
(Print parent's name)

\_\_\_\_\_  
(Parent's signature)

\_\_\_\_\_  
(Date)

### SECTION B – Media Release (must be completed for those under the age of 18)

Photographer(s) may be present at this event, taking photos for the Catholic Diocese of Saginaw, parish and/or social media websites for informational and/or promotional purposes. Please check the appropriate box below:

I give permission for photos and/or videos of my child to be included with other Middle School Retreat photos on the Catholic Diocese of Saginaw, parish and/or social media websites.

I do *not* give permission for photos and/or videos of my child to be taken or posted on any Catholic Diocese of Saginaw, parish and/or social media websites.

Student Name (s): \_\_\_\_\_

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

**SECTION C – Medical Treatment Authorization**

To Whom It May Concern:

I hereby authorize treatment for my child by a qualified and licensed physician of any condition which, in the opinion of the physician, is deemed necessary and appropriate. This authority is granted only after a reasonable effort has been made to reach me/my family.

Reason for which release is intended: **Middle School Retreat, March 21, 2020**

Child's Name \_\_\_\_\_ Relationship to you:  Son  Daughter

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

Emergency Contact: \_\_\_\_\_

Emergency Phone(s): (\_\_\_\_) \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_

Family Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Physician Address: \_\_\_\_\_ City: \_\_\_\_\_

List any food allergies, other allergies, medication, contacts, or other pertinent comments (**Prescription medication must be provided in original containers**):

Health Insurance Data:

Company: \_\_\_\_\_ Policy: \_\_\_\_\_

Group: \_\_\_\_\_ Contract: \_\_\_\_\_

I further authorize the person who presents the minor to sign the Acknowledgment of Receipt of Notice Privacy Rights that may be presented by the physician or health care facility.

This authorization is completed and signed of my own free will with the sole purpose of authorizing medical treatment deemed necessary and appropriate by the treating physician.

Date: \_\_\_\_\_ Signed: \_\_\_\_\_

(Parent/Guardian)

**Return this completed form with payment to:**

**Pat Preston  
Office of Youth Ministry  
5802 Weiss Street  
Saginaw MI 48603-2799**

**Registration Deadline: March 17, 2020**