



PERMISSION FORM FOR YOUTH MINISTRY 2022-2023

This form is for the youth of the Parish of St. Michael - St. Malachy, located at 225 Jerome st. Brooklyn, Ny 11207. This serves as permission for my child to take part in any youth ministry Activity that is located on the premises for this school year (*St. Michael - St. Malachy's Church or office, the Friary Garden, or Salve Regina Catholic Academy buildings*)

I understand that if there is any other trip or event planned outside, there will be a special flyer/permission form for each extra event planned.

This is an effort of the parish, to engage teens, re-ignite their faith, and keep them connected to the church so they can continue to grow in the practice of their faith life.

There will be adult supervision, and reasonable and appropriate measures will be taken to minimize risk or injury, as well as social distancing to protect from Co-vid 19 or other illnesses. I will be notified immediately if any issue is to take place through the contact information I have provided below. In case of an emergency, he/she may be treated by a doctor. Should medical attention be required for my child, I will pay the expenses incurred. In case of accident, injury or loss, my family and I will not hold the Parish of St. Michael-St. Malachy, the Jornada Movement, the Diocese of Brooklyn, NYC Catholic Retreats, Young Life, the Archdiocese of New York, or any affiliate/agent liable.

I consent that any pictures/video/audio taken of my child in connection with this event can be used for publicity, promotion or television showing now or in the future, and I waive compensation in regard thereto. I understand that these forms of media will only be used in order to grow these youth ministry efforts moving forward.

Lastly, I am giving permission to receive messages and updates via our mass messaging system "FlockNote" to my text messages and/or email.

For further information I will contact the parish at: (718) 647-1818 or visit the parish website at: <http://www.parishstmichaelstmalachy.org/>

Child's Name: _____
Parent/Guardian (Name printed): _____
Parent/Guardian Signature: _____
Address: _____
City, State, Zip: _____
Emergency Contact Number: _____
Emerg. Contact's Relationship to Child: _____
Parent's Phone Number: _____
Parent's Email: _____