

**2019 NFCYM/NCYC LIABILITY WAIVER AND PERMISSION FORM
for Parent(s)/Guardian(s) of Youth Participants (Youth signature required as well)**

ARCHDIOCESE OF KANSAS CITY IN KANSAS, REGION 09

Parish/School Group: _____

Full Name of Youth: _____

Youth's Date of Birth: _____

Parent/Guardian Name: _____

Home Address: _____

Parent/Guardian Emergency Contact Information:(include full name, relationship, and both primary and secondary numbers at which to reach them: _____

Alternate Emergency Contact, if parent/guardian is not available (include full name, relationship, and both primary and secondary numbers at which to reach them: _____

IMPORTANT: Each youth traveling to the Conference, must submit a signed copy of this form, or they will not be permitted to attend National Catholic Youth Conference, sponsored by The National Federation for Catholic Youth Ministry, Inc. ("NFCYM"). Because it contains emergency contact information, it is advisable to keep a copy of this signed waiver in the youth's name badge at all times during the Conference. By signing this waiver, you agree that you may be giving up legal rights and remedies available to yourself and your family. Please carefully read and complete this waiver. If you have questions, contact an attorney.

NATURE OF THE CONFERENCE EVENT: I understand that the nature of this private Conference event sponsored by NFCYM and its member Roman Catholic Dioceses is: being held at the Indiana Convention Center and Lucas Oil stadium ("Facilities"), in Indianapolis, Indiana, from November 21-23, 2019, some 25,000 youth and adults will attend over three days, and as a condition of using the Facilities, the Facilities require the Conference to retain outside security and medical personnel whose actions may be beyond NFCYM's control. The Conference will be in session from noon-10:30 PM on day one, 7:30 AM-10:30 PM on day two, and 7:30 AM-11:30 PM on day three, excluding breaks for recreational activities.

NFCYM CONFERENCE CODE OF BEHAVIOR FOR YOUTH:

Parent/Guardian: I agree to instruct my child to abide by all rules and regulations as outlined in the **Youth Code of Conduct, revised 02/19/19**. I understand that if I have not heretofore seen the Code, it is my duty to seek a copy of the Code and to have reviewed it and explained it to my child prior to signing this waiver. I agree that if my child fails to abide in any way by the Code, that my child can be dismissed from the Conference and sent home immediately at my expense for the immediate transportation home with no right of reimbursement or refund for any amount in connection therewith from NFCYM et al.

_____ *Initials of Parent/Guardian*

Youth: As a participant in the Conference, I understand and agree to conform to the **Youth Code of Conduct, revised 02/19/19**. I also understand and agree that my parent/guardian will be notified at the time of any infractions requiring my dismissal from the Conference and that I will be sent home at my parent's/guardian's expense. Among other things, being found with any alcoholic beverages, drugs, or weapons is cause for automatic dismissal from the Conference.

_____ *Initials of Youth*

NATURE OF RISKS: I understand that voluntarily traveling to and attending a Conference of this nature may involve certain risks beyond the reasonable control of NFCYM, its officers, directors, volunteers, and agents in connection with the Conference (“NFCYM et al.”) and the Diocese and all parishes within it, and their respective officers, directors, volunteers, and agents, and chaperones, or representatives associated with the Conference (“Diocese et al.”), including but not limited to accidents, emergencies, exposure to reckless conduct of other persons, and/or negligence of security and medical personnel, and that NFCYM et al. and the Diocese et al. disclaim any and all responsibility for any such risks. I understand that my child will sometimes be at the Facilities, and at other times may be at other places such as hotels or on tourist excursions in or about Indianapolis. If during any break in the Conference there may be an opportunity to participate in recreational or other activities away from the Facilities, participants do so at their own risk and subject to all terms and conditions set by any recreational or other provider.

WAIVER OF LIABILITY/HOLD HARMLESS: By signing this liability waiver, I agree and acknowledge that I may be giving up important legal rights and remedies available to myself, my family, my heirs, successors, and assigns. For value received, I agree on behalf of myself, my child's other parent, if known or living, my child named herein, and our heirs, successors, and assigns (“Our Behalf”) that I assume all risks and waive any liability of any nature whatsoever against and agree to hold harmless NFCYM et al. and the Diocese et al. with respect to any and all actions, claims or demands that may be made or brought on Our Behalf against NFCYM et al. and/or the Diocese et al. arising out of or in connection with my child's travel to or attendance at the Conference, or any other activity my child may engage in while in the Indianapolis area. In addition, and not by way of limitation, I further agree to abide by any terms and conditions imposed by name badges or credentials, e.g., permission to photograph. Further, for value received, for any injury to third parties that may arise because of my child's actions or omissions, I agree to hold harmless and defend NFCYM et al. and the Diocese et al. with respect to any and all actions, claims, expenses, or demands arising therefrom that may be made or brought against NFCYM et al. and/or the Diocese et al., including but not limited to reasonable attorneys' fees and expenses arising in connection therewith.

MEDICAL PERMISSIONS (LIMITED): As a condition of attending the Conference at the Facilities, I grant permission in the event of an emergency or accident for emergency medical care to be administered to my child within the Facilities and/or during or after transportation to a hospital or doctor for emergency medical care. I understand that it is not NFCYM et al. responsibility to attempt to reach my child's emergency contacts, and that I remain responsible for my child's medical expenses. **In the event it comes to the attention of the medical personnel or the Diocese et al. that my child complains of illness, I acknowledge I have completed the 2019 NCYC Permission and Health electronic form, and therein have either granted or denied permission for non-prescription medication (such as aspirin, throat lozenges, cough syrup) to be given to my child by medical personnel or the Diocese et al.**

CONFERENCE FEE NONREFUNDABLE: I agree that if I suffer an illness requiring dismissal from the Conference, there is accident or emergency requiring dismissal of myself from the Conference, if I violate the Code, or if the Conference must be discontinued in event of accident or emergency, I must return home at my expense, and I assume the risk of any loss of any nonrefundable or additional costs associated with travel and fees for the Conference, with no right of reimbursement or refund for any amount in connection with therewith from NFCYM et al. or the Diocese et al.

I FULLY UNDERSTAND THE CONSEQUENCES OF, AND SIGN THIS LIABILITY WAIVER AND PERMISSION KNOWINGLY, FREELY, AND WILLINGLY.

SIGNATURE OF PARENT/GUARDIAN: _____

DATE: _____

SIGNATURE OF YOUTH PARTICIPANT: _____

DATE: _____