LIABILITY WAIVER AND PERMISSION FORM FOR MINORS

(those under 18 years of age)

PARTICIPATING IN THE NATIONAL YEAR OF YOUTH SUMMIT 2017

INSTRUCTIONS: A **separate** copy of this waiver must be completed for **each child** traveling to the Summit. Each child must submit a completed copy of this form, signed by both the child and a parent/guardian, or the child **will not be permitted** to attend the National Year of Youth Summit 2017. Because it contains emergency contact information, it is advisable to keep an additional personal copy of this signed waiver in the child's name badge at all times during the Summit.

Nature of the Event: I understand the nature of this gathering is a private event sponsored by the Diocesan Youth Apostolate (DYA) of the St. Thomas SyroMalabar Diocese of Chicago. It will be held at the Whitehall Hotel, located at 1700 Smith Street in Houston, TX from December 28-31, 2017. Some 400 young adults will attend over four days (three nights), and as a condition of using the Facilities, the Facilities may require the Conference to retain security whose actions may be beyond DYA's control. The Summit will officially be in session from 3:00 PM on December 28, 2017, till 2:00 PM on December 31. 2017.

Nature of Risks: I understand that voluntarily traveling to and attending a gathering of this nature may involve certain risks beyond the reasonable control of the DYA, its National team, volunteers, and agents in connection with the Summit, including but not limited to, accidents, emergencies, exposure to reckless conduct of other persons, and/or negligence of security and medical personnel, and that the DYA et al. disclaim any and all responsibility for any such risks. *If* during any break in the Summit there is an opportunity to participate in recreational or other activities in, or outside, the facility, participants do so at their own risk and are subject to all terms and conditions set by any recreational setting 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. 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 the Diocesan Youth Apostolate (DYA), the St. Thomas SyroMalabar Diocese of Chicago, and all affiliates, with respect to any and all actions, claims or demands that may be made or brought on our Behalf against the DYA or its affiliates, arising out of, or in connection with, my child's travel to/from or attendance at the Conference, or any other activity my child may engage in while at the facilities. 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 the Diocesan Youth Apostolate (DYA) and its affiliates, with respect to any and all actions, claims, expenses, or demands arising therefrom that may be made or brought against the Diocesan Youth Apostolate (DYA), including but not limited to reasonable attorneys' fees and expenses arising in connection therewith.

Medical Permissions (Limited): As a condition for attending the Summit at the Facilities, I grant permission to the DYA 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 further understand that I remain responsible for my child's medical expenses. In the event it comes to the attention of the medical personnel that my child complains of illness, I grant permission for non-prescription medication (such as aspirin, throat lozenges, cough syrup) to be given to my child by medical personnel.

Conference Code of Behavior for Youth:

Initials of Parent/Guardian

Initials of Youth

Parent/Guardian: I agree to instruct my child to abide by all rules and regulations as outlined in the DYA Participant Code of Conduct (the "Code"). 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 <u>immediately be dismissed</u> from the Summit and sent home at my expense for the immediate transportation home with **no right of reimbursement or refund** for any amount in connection therewith from the Diocesan Youth Apostolate (DYA).

Participant: As a participant in the Conference, I understand and agree to conform to the DY	4
Participant Code of Conduct. I also understand and agree that my parent/guardian will be	
notified at the time of any infractions requiring my dismissal from the Summit and that I will	эe
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 Summit.	

Conference Fee Nonrefundable: I agree that if my child suffers an illness requiring dismissal from the Summit, if there is accident/emergency requiring dismissal of my child from the Summit, if my child commits an infraction of the Code, AND/OR if the Conference must be discontinued in event of accident or emergency, my child 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 Summit.

I have carefully read and reviewed this Waiver, Release and Hold Harmless Agreement. I fully understand the

consequences of and sign this LIABILITY WAIVER AND PERMISSION knowingly, freely, and willingly.		
allowing me,	by the DYA and the St. Thomas SyroMalabar Diocese of Chicago in (Printed First and Last Name), a legal minor, to participate in the (S), a young adults gathering hosted by the Diocesan Youth Apostolate of Chicago, I (together with my parent or guardian) represent and agree, and any other person proclaiming by, under or through me, as follows:	
of which I may not fully appreciate) and the others. I accept and voluntarily incur all risk participation in NYOYS 2017, regardless of	lational Year of Youth Summit 2017 (NYOYS) involves certain risks (some at injuries, death, property damage or other harm could occur to me or ks of any injuries, damages, or hard which arise during or result from my whether or not caused in whole or in part by the negligence or other labar Diocese of Chicago, and/or its or their departments, affiliates, eleased Parties").	
damage, losses or other claims of any type,	against any of the Released Parties for any injuries, damages, property, whether known and unknown, which will arise during or result from Summit 2017, regardless of whether or not cause in whole or part by Released Parties.	
indemnify and hold the Released Parties had but not limited to reasonable attorney's fee Released Parties as a result of any claims of against the DYA to recover any losses, liabil	in this waiver, as well as those listed in the Code of Conduct. I agree to armless from all losses, liabilities, damages, costs or expenses (including es and other litigation costs or expenses) incurred by any of the r suite that I (or anyone claiming by, under or through me) may bring lities, costs, manages, or expenses which arise during or result from my Summit (2017), regardless of whether or not caused in whole or part by Released Parties.	
4. EXECUTED this day:/	/(date)	
Participant Name (printed):		
Signature of Participant:		
Parent/Guardian Name (printed):		
Signature of Parent/Guardian:		