

LIABILITY WAIVER AND PERMISSION FORM FOR MINORS

(those under 18 years of age)

PARTICIPATING IN Western Youth SyroMalabar Diocesan Meet 2.0

INSTRUCTIONS: A **separate** copy of this waiver must be completed for **each child** traveling to the conference. 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 Western Youth SyroMalabar Diocesan Meet 2.0. 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 conference.

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 HUME SoCal, located at 32355 Green Valley Lake Rd, Green Valley Lake, CA 92341 from September 2-5, 2022. Some 150-250 youth and young adults will attend over three days (two 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 conference will officially be in session from September 2-5, 2022.

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 /Regional team, volunteers, and agents in connection with the conference, 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 conference 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 conference 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:

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 **immediately be dismissed** from the conference 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).

Initials of Parent/Guardian _____

Participant: As a participant in the Conference, I understand and agree to conform to the DYA 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 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 _____

Conference Fee Nonrefundable: I agree that if my child suffers an illness requiring dismissal from the conference, if there is accident/emergency requiring dismissal of my child from the conference, 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 conference.

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.

In consideration of the permission granted by the DYA and the St. Thomas SyroMalabar Diocese of Chicago in allowing me, _____ (Printed First and Last Name), a legal minor, to participate in the Western Youth SyroMalabar Diocesan Meet 2.0 (WYSDOM 2.0), a youth and young adults gathering hosted by the Diocesan Youth Apostolate (DYA) of St. Thomas SyroMalabar Diocese of Chicago, I (together with my parent or guardian) represent and agree, on behalf of myself and my heirs, assigns, and any other person proclaiming by, under or through me, as follows:

1. I acknowledge that participating in the Western Youth SyroMalabar Diocesan Meet 2.0 involves certain risks (some of which I may not fully appreciate) and that injuries, death, property damage or other harm could occur to me or others. I accept and voluntarily incur all risks of any injuries, damages, or harm which arise during or result from my participation in WYSDOM 2.0, regardless of whether or not caused in whole or in part by the negligence or other fault of the DYA or the St. Thomas Syro Malabar Diocese of Chicago, and/or its or their departments, affiliates, employees, officers, agents or insurers ("Released Parties").

2. I waive, release and discharge all claims against any of the Released Parties for any injuries, damages, property damage, losses or other claims of any type, whether known and unknown, which will arise during or result from participation in the Western Youth SyroMalabar Diocesan Meet 2.0 (WYSDOM 2.0), regardless of whether or not caused in whole or part by the negligence or other fault of any of the Released Parties.

3. I agree to all the conditions listed above in this waiver, as well as those listed in the Code of Conduct. I agree to indemnify and hold the Released Parties harmless from all losses, liabilities, damages, costs or expenses (including but not limited to reasonable attorney's fees and other litigation costs or expenses) incurred by any of the Released Parties as a result of any claims or suits that I (or anyone claiming by, under or through me) may bring against the DYA to recover any losses, liabilities, costs, damages, or expenses which arise during or result from my participation in the Western Youth SyroMalabar Diocesan Meet 2.0 (WYSDOM 2.0), regardless of whether or not caused in whole or part by the negligence or other fault of any of the Released Parties.

4. EXECUTED this day: _____/_____/_____ (date)

Participant Name (printed):	
Signature of Participant:	
Parent/Guardian Name (printed):	
Signature of Parent/Guardian:	