

**St. Mary of the Assumption Roman Catholic Church  
and  
The Diocese of St. Catharines**

**CONSENT, INDEMNITY AND REGISTRATION FORM**

Please accept this registration for **CHILDREN'S BOWLING PARTY** to be held on Sunday March 4, 2012 from 3:30pm to 5:30pm at PLA-MOR BOWLING LANES, 106 Main Street, St. Catharines.

***Participants under age 18 must have their parent/guardian read the following  
and sign where indicated below.***

I/We agree to waive, discharge and release the Parish of St. Mary of the Assumption and the Diocese of St. Catharines, their servants, agents, staff, affiliates and volunteers, from any and all claims or liability for damages or expenses, howsoever caused, whether by negligence or otherwise, arising directly or indirectly from this event.

I/We hereby agree to the terms of the above release. In the case of a minor child: should an emergency arise and I cannot be reached I further authorise the project supervisor to act on my behalf to make decisions pertaining to the health, welfare and safety of my child.

I/We have reviewed and agree to the expectations of participants for this event. I/We understand that any infraction of these will result in immediate dismissal at my/our expense.

\_\_\_\_\_  
*Participant signature*

\_\_\_\_\_  
*Date*

**MEDIA WAIVER**

I, the undersigned, do hereby consent to have photographs taken of me/my child for the use in any form of media and/or publicity material produced or printed by St. Mary of the Assumption Parish or the Diocese of St. Catharines and or other appropriate partners. The undersigned authorizes the photographer/production company to make reproductions of the photograph(s) to be used at the full discretion of the above-mentioned parties. The undersigned release and forever discharges the aforementioned parties and the photographer/ production company against all actions and claims.

\_\_\_\_\_  
*Participant signature*

\_\_\_\_\_  
*Date*

**CONSENT BY PARENT / GUARDIAN**

I have read the above Indemnity and Media Waivers and agree to their terms.

\_\_\_\_\_  
*Parent/Guardian signature*

\_\_\_\_\_  
*Date*

PLEASE PRINT

\_\_\_\_\_  
*Name of Parent/Guardian*

\_\_\_\_\_  
*Phone Number*

\_\_\_\_\_  
*Alternate Phone Number(s)*

