

Notre Dame de la Mer Parish Religious Education Program, North Wildwood, NJ

Dear Parent or Legal Guardian:

Your son/daughter is eligible to participate in a parish-sponsored activity that will take place off of the parish property and buildings. This activity will take place under the guidance and supervision of employees and approved adult chaperones from Notre Dame de la Mer Parish.

Name of Event: **CONFIRMATION RETREAT**

Destination: **MARIANIST FAMILY RETREAT CENTER, 417 YALE AVENUE, CAPE MAY POINT, NJ 08212**

Chaperones: **As per diocesan guidelines.**

Date of Event: **4/21/20 4-8pm**

Transportation Method: **Supplied by parents or families – Parish will not supply transportation**

Cost was included in the Confirmation Fee.

Please note that you are not only requesting the participation of your child in this activity and consenting to such participation as well, but you are waiving any and all claims which you might have that arise out such participation.

We, as parents/guardians of: _____ hereby give permission for our child to participate in the event described above. **In consideration of permission granted by Notre Dame de la Mer Parish and the Diocese of Camden, New Jersey, and their respective agents, servants, employees, officers, trustees, administrators and volunteers, for damages and /or injuries to us or our child which may arise from participation in this activity and agree to indemnify and hold these entities harmless from and against any claim brought by or on behalf of our child or by or on behalf of any other person arising out of or in any way connected with our child’s participation in the activity.**

Print Parent’s Name _____ Print Parent’s Name _____

Signature: _____ Signature: _____

Date: _____ Date: _____

In case of emergency who is to be called? Name: _____

Number: _____

Is your child allergic to anything that we should know about? _____

_____ **RETURN BY ASAP**