



**St. Susanna Youth Ministry
GENERAL PERMISSION SLIP**

**2012 Faith Alive Winter Retreat
Saturday, February 18 from 9:00 am
Until Sunday, February 19, 4:00pm**

REGISTRATION
DEADLINE:
February 7, 2012

Cost: **\$95** (if this is a hardship, contact the Youth Ministry office)
Location: **King's Domain**
5778 State Route 350
Oregonia, OH 45054
Meeting Place: **St. Susanna parking lot/Gathering Space**
Transportation: **TBA: carpool or charter bus**
Contact Person: **Jeffrey Davis**
Phone (Emergency): **937 768-1050 cell**
Other Information: We will provide all meals and chaperones.

Publish date: 1/10/12

1. I, the lawful parent or guardian of _____ (child's name), give permission for my child to participate in the above activity with the St. Susanna Youth Ministry.
2. I agree to instruct my child to cooperate with the staff and volunteers of St. Susanna in charge of this activity.
 - (i) Students will be expected to follow the St. Susanna Code of Conduct. Copies are available in all Youth Ministry handbooks and on our website,
3. I understand that the volunteers and staff of St. Susanna will make a reasonable attempt to contact me as soon as possible in the event of a medical emergency involving my child.
4. I agree that St. Susanna and its volunteers and employees may use my child's portrait or photograph for promotional purposes, website and office functions.

I have carefully read this statement and my signature acknowledges that I fully understand the content and its meaning.

Signature of Parent or Guardian _____ Date ____/____/2012

Phone: Home: _____ Cell: _____

Emergency Contact _____ Relationship _____
(Can be the other parent)

Emergency Phone: Home: _____ Cell: _____

Email you check regularly _____

Completed by Parent or Guardian - Please Print

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**St. Susanna Youth Ministry - ARCHDIOCESE OF CINCINNATI
PERMISSION, RELEASE AND MEDICAL POWER OF ATTORNEY FORM**

← Please read

must be on-file with the Youth Ministry Office to make this permission slip valid. If your student registered for Faith Alive, we already have one on file. If there have been any changes, please update this form.

Please review the complete St. Susanna Youth Ministry registration and cancellation policy regarding fee increases for late registrations

← Please read

For Office Use Only: Date Received: _____ Fee: _____ Late Fee: _____
Comments: _____