

St. Pius X Church
6905 Blondo Omaha, NE 68104

#5 Due 5/5

Parental/Guardian Consent Form, Liability Waiver, & Conduct Code – Confirmation Discipleship Group

Participant's Name _____ DOB _____ Sex _____

Parent/Guardian Name _____

Home Address (include city, state & zip.) _____

Cell Phone _____ Alternate Phone _____

I, _____, grant permission for my youth, _____
Parent/Guardian Name Youth's Name

to participate in the St. Pius X Discipleship Group events that are located away from the parish. These activities will take place under the guidance and direction of parish adults.

Emergency Medical Agreement. The following authorization is given in regard to the above named child.

Name of physician _____ Office Phone _____

Are there any existing medical conditions an emergency physician would need to know (allergies, drug reactions):

I hereby authorize a representative of St. Pius X Church to take my child to a physician or facility for medical treatment in the event of an emergency in which neither a parent nor the adult in whose care the minor has been entrusted can be reached. If the above named physician cannot respond, I authorize any physician or medical center to treat my child.

If parent or guardian cannot be reached, whom should we notify?

Name _____ Cell Phone _____ Alt. Phone _____

Signature of Parent/Guardian _____ Date _____

Type of Event: St. Pius X Discipleship Group Projects

Locations: TBA

Date and Time of the Event: TBA from May 2025 to November 2025

Transportation: Parent Responsibility

Parent/Guardian signs here 1 of 3

As parent and/or guardian, I remain legally responsible for any personal actions taken by the above named minor ("participant"). I agree on behalf of myself, my child named herein, or heirs, successors, and assigns, to hold harmless and defend **The Church of St. Pius X**, its officers, directors and agents, chaperones, or representatives associated with the event arising from or in connection with my child attending the event or in connection with any illness or injury or cost of medical treatment in connection therewith and I agree to compensate the parish, its officers, directors and agents, chaperones, or representatives associated with the event for reasonable attorney's fees and expenses arising in connection therewith.

Signature: _____ Date _____

Parent/Guardian signs here 2 of 3

COMPLETE OTHER SIDE!

St. Pius X Discipleship Group

Code of Behavior

We are happy that you are joining us as part of a St. Pius X Discipleship Group! This Code of Behavior is to help you understand what is expected of you during the event, and to help make it a fun, healthy, and growth-filled experience for all involved. Please read through the Code carefully. You will be expected to honor and uphold it throughout your time with us.

- Participants will follow all safety directives throughout the event. Directives will be sent in advance of each event and may vary depending upon the type of event, but will address safety issues such as personal protective equipment (masks, gloves, hats and shoes) and maintaining safe distances.
- Rules help maintain order, but rules alone cannot guarantee a successful experience. Success depends on participants' willingness to work together for the common good.
- Participants take part in this experience as part of *St. Pius X Parish*. The adult leader maintains primary responsibility for the actions of participants. The families of participants assume responsibility for any damage done to the environment or facilities by individual participants.
- Youth participants must inform the adult leader of their whereabouts at all times.
- Parents will transport participants to and from service locations.
- Youth's cell phones must be turned off during the service experiences.
- Participants are expected to display Christian behavior at all times. Disrespectful comments made about or towards another person, swearing, comments with sexual overtones, etc. will not be tolerated.
- Modest, casual dress is expected for all service experiences. Shoes must be worn at all times.
- The purchase, possession or use of cigarettes, alcohol or drugs by participants will result in immediate dismissal from the program. Major infractions of the Code of Behavior will meet with the same consequences.

Parent or Guardian: I agree that my child shall abide by the rules outlined in the *St. Pius X Discipleship Group Code of Behavior*. I have reviewed it and discussed the *Code* with my child prior to signing this form. I agree that if my child fails to consistently abide by the *Code* or engages in a serious infraction of the *Code*, he or she may be immediately dismissed from the St. Pius X sponsored program and sent home at my expense.

Parent/Guardian signs here 3 of 3

Signature _____ **Date** _____

Youth Participant: I understand and agree to the *St. Pius X Discipleship Group Code of Behavior*. I also understand that my parent(s) or guardian will be notified at the time of any infractions requiring my dismissal from the program and that I will be sent home at my own or their expense. (Your signature must appear below in order to participate in the St. Pius X sponsored event.)

Signature _____ **Date** _____

Youth signs here!

This form needs to be completed and returned by Discipleship Group Opening Night.

Facilitators: This original must be kept with you at all times when your group is at a service location.
A copy is on file in the Religious Education Office.

COMPLETE OTHER SIDE!