## PARENT FINANCIAL RESPONSIBILITY WAIVER CATHOLIC DIOCESE OF EVANSVILLE

Youth's NameAge	Grade
School/ChurchCity	,
Event	
Date(s) of Event	
I/We, the parent(s) of the above named youth, assume full and total responsibility for any and all financial costs incidental to my child's failure to observe the conduct for this event. By signing this form, I attest that I am aware that any breach of the Code of Conduct of the Diocese of Evansville and/or the National Catholic Youth Conference will result in my child being sent home at my/our full expense. These costs may include, but are not limited to, a full recovery of event fees, transportation costs to Evansville, Indiana, transfers (including taxis, busses, trains, and other forms of public transportation), airport fees, and conference, hotel, and airline penalties. Minors may need to be accompanied by an adult, and, therefore, I/we agree that any transportation costs for a chaperone will be my/our responsibility. All transportation for my child and his/her chaperone will be at the discretion of the Director of the Office for Youth and Young Adult Ministry. I/We do further hereby waive, release, absolve, indemnify, and hold harmless the Bishop of the Catholic Diocese of Evansville, members, and representatives, adult sponsors, and other volunteers, including the Director of the Office for Youth and representatives, adult Ministry, involved in the activities and transportation associated with the event from any and all claims, including negligence, but not reckless or intentional conduct) in any way resulting from or arising in connection with the activities and/or transportation to and from the event.	
Father's Signature X	Date
Mother's Signature X	Date
Legal Guardian's Signature X	Date

