



ABBHEY YOUTH FESTIVAL

SAINT JOSEPH ABBEY & SEMINARY COLLEGE

75376 RIVER ROAD, ST. BENEDICT, LA 70457 phone 985.867.2233
e-mail: info@abbeyyouthfest.com www.AbbeyYouthFest.com fax 985.867.2270

LIABILITY & PHOTO RELEASE FORMS (2 pages)

Participant's Name _____ Date of Birth: _____
Address _____ Telephone: _____
City _____ State _____ Zip Code _____
School or Group Name _____
Group Leader's Name _____

PARENT/GUARDIAN

I, _____ (name), give permission to my above mentioned son/daughter to attend the Abbey Youth Festival to be held on **March 26, 2011**. If needed for health reasons, I give permission for my child to be evaluated, diagnosed, treated, and/or given medication in accordance with standard medical practice by appropriate health care personnel. I release St. Joseph Abbey and St. Joseph Seminary College and its agents of all responsibility and consequences that may arise as a result of any injury suffered and resulting treatment. Further, I agree to accept any and all financial responsibility as a result of scheduling medical treatment.

I have read, and my child agrees to abide by all the rules and regulations as listed on the "Abbey Youth Festival 2011 Policies and Procedures" sheet as they are enforced by the Festival staff. I understand that St. Joseph Abbey and St. Joseph Seminary College will not be liable if my child fails to cooperate with regulations, and that any infraction of the rules may result in immediate dismissal from the Abbey Youth Festival at my expense.

Signature of Parent/Legal Guardian _____ Date _____

Family Physician Telephone #: _____

Allergies _____

Current Medications _____

Medical History _____

IN CASE OF AN EMERGENCY, PLEASE CONTACT:

Name:	Name:
Address:	Address:
Home Phone:	Home Phone:
Work or Cell Phone:	Work or Cell phone:

**** FORMS MUST BE COMPLETED BY EACH PERSON ATTENDING! ****



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PHOTOGRAPHY CONSENT AGREEMENT & RELEASE OF LIABILITY

(Adult & Minor Participant Form)

In consideration of the taking and use of the photographs of the named below ("Adult" or "Minor"), for good and valuable consideration herein acknowledged as received, I hereby grant to the Abbey Youth Festival and St. Joseph Abbey and Seminary College the irrevocable and unrestricted right and permission to take, use, re-use, publish, and republish photographic pictures of the "Adult or Minor" or in which the "Adult or Minor" may be included, made through any medium and in any and all media now or hereafter known for illustration, promotion, art, editorial, advertising, trade, or any other purpose whatsoever. I also consent to the use of any published matter in conjunction therewith.

I hereby waive any right that I or the Minor may have to inspect or approve the finished product or products and the advertising copy or other matter that may be used in connection therewith or the use to which it may be applied.

In exchange for the benefits derived by my participation and/or the Minor's participation in this project, I hereby agree that I, my heirs, distributees, guardians, legal representatives, and assigns do release and will indemnify, hold harmless the photographer, Abbey Youth Festival, its agents, and St. Joseph Abbey and Seminary College for claims for libel or violation of any right of publicity or privacy arising out of or in connection with my participation or the Minor's participation in the photography project, from whatever cause, including the active or passive negligence of the photographer, Abbey Youth Festival, its agents, or St. Joseph Abbey and Seminary College.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND SIGN IT OF MY OWN FREE WILL.

Participant: Minor (Print Name) _____

Signature of Parent/Guardian for consent: _____

Print Parent's Name: _____

Participant: Adult (Print Name) _____

Signature of Adult: _____