

ARCHDIOCESE OF BALTIMORE
REGISTRATION FORM AND
WAIVER OF LIABILITY AND HOLD HARMLESS AGREEMENT

Name (Print) _____ Birth Date _____

Address _____

Work Phone: _____ Mobile Phone: _____

Home Phone: _____ Email address: _____

Male Female

Have you traveled overseas before? Yes No
If yes, where have you traveled and when? _____

Emergency Contact Name: _____

Emergency Contact Cell Phone: _____ Work Phone: _____

Home Phone: _____

World Youth Day, Panama - January 21 – 28, 2019

I acknowledge receipt of the attached information sheet describing the planned activity.

In consideration of the opportunity to participate in _____ (the "Activity"), I understand and agree as follows:

1. I fully understand that: (a) I am not required to participate in the Activity; (b) the Activity involves risks and dangers, including the possibility of serious bodily injury, permanent disability, paralysis, and death; (c) these risks may be caused by my own actions or inactions, the actions or inactions of others, the inherent nature of the Activity, the conditions in which the Activity takes place, or other causes; and (d) there may be other risks, including economic losses, either not known to me or not readily foreseeable at this time. I voluntarily elect to participate in the Activity, knowing that the Activity may be hazardous to me and my property. I fully and voluntarily accept and assume all risks and all responsibility for any losses, costs, and damages I incur as a result of my participation in the Activity.
2. I knowingly and voluntarily, do hereby release, for myself, my family members, agents, heirs, assigns, and representatives, forever **RELEASE, WAIVE, DISCHARGE, HOLD HARMLESS AND INDEMNIFY** the Young Adult and College Campus Ministry and the Division of Youth & Young Adult Ministry for the Archdiocese of Baltimore, Roman Catholic Archbishop of Baltimore and his successors, a Corporation Sole, and each of their affiliate organizations, and respective agents, employees, officers, directors, volunteers,

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officials, representatives, agents, insurers, students and other participants (collectively, the "Releasees") from any and all liability, costs, claims, demands and causes of action arising out of or relating to any loss, damage or injury (including death) sustained in connection with or arising out of my participation in the Activity.

3. It is my express intent that this Waiver and Hold Harmless Agreement shall bind my family members, agents, heirs, assigns, and representatives and shall be deemed as a WAIVER, RELEASE, DISCHARGE, AND COVENANT NOT TO SUE the Releasees. I hereby further agree that this Waiver and Hold Harmless Agreement shall be governed by and construed in accordance with the laws of the State of Maryland and that any related suit or other proceeding must be filed or entered into only in Maryland. I agree that if any portion of this Agreement is held to be invalid, the balance, notwithstanding, shall continue in full force and effect.

I understand that my participation in said Activity may require a minimum level of fitness for safe participation, and that the Released Parties do not screen, medically or otherwise, individuals that participate in the Activity. I acknowledge that it is my sole responsibility to make certain that I am physically fit and healthy enough to participate in the Activity.

I understand that the Released Parties do not provide medical treatment or medical, health or other insurance coverage, however, I hereby grant permission for any staff member of the activity to obtain medical care from a licensed physician, hospital, or medical clinic in the event that I cannot make known my desire for treatment.

(Check one of the following:)

I am covered by hospitalization and medical insurance under: policy# _____
issued by _____

I do not have medical coverage and assume responsibility for the cost of hospitalization and medical care.

ADD any other medical information concerning medication, allergies, illness, etc.: _____

ADD any dietary restrictions: _____

Participant is advised that photographs or digital recordings of participants may be used in publications, websites or other materials produced from time to time by the parish/school, Division of Youth and Young Adult Ministry or the Archdiocese of Baltimore. (Participants will not be identified, however, without specific written consent.). Participants who do not wish to be photographed or digitally recorded should so notify the staff of the Division of Youth and Young Adult Ministry in writing. Please note that the Released Parties have no control over the use of photographs or digital recording taken by media that may be covering the events in which you participate.

BY SIGNING BELOW, I ACKNOWLEDGE AND REPRESENT THAT I have read and understand this entire Registration Form and Waiver of Liability and Hold Harmless Agreement, including that I give up substantial rights by signing it, and sign it freely, willingly, and voluntarily; I am at least eighteen (18) years old and fully competent; and I execute this Agreement for full and adequate consideration fully intending to be bound by the Agreement.

Signature

Date

Witness (Print Name / Signature)

*Please print this completed document and mail with down payment of \$250 to:
Archdiocese of Baltimore
Attn: DYYAM
320 Cathedral Street
Baltimore, MD 21201*