



# CTeen Regional Event Consent Form

## COMBINED PERMISSION, RELEASE, WAIVER OF LIABILITY AND INDEMNITY AGREEMENT AND EMERGENCY MEDICAL/CONTACT INFORMATION

### PERSONAL INFO:

\_\_\_\_\_  
Teen's Name

\_\_\_\_\_  
Mobile Phone

\_\_\_\_\_  
Birth Date

\_\_\_\_\_  
Home Phone

\_\_\_\_\_  
Address

\_\_\_\_\_  
Parent 1/Guardian's Name

\_\_\_\_\_  
Mobile Phone

\_\_\_\_\_  
Home Phone

\_\_\_\_\_  
Parent 2/Guardian's Name

\_\_\_\_\_  
Mobile Phone

\_\_\_\_\_  
Home Phone

### IN CASE OF EMERGENCY CONTACT:

_____ Emergency Contact 1	_____ Mobile Phone	_____ Home Phone	_____ Relationship
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_____ Emergency Contact 2	_____ Mobile Phone	_____ Home Phone	_____ Relationship
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### PERMISSION TO PARTICIPATE: RELEASE, WAIVER OF LIABILITY, AND INDEMNITY AGREEMENT

I/we give permission for \_\_\_\_\_ (name of teen) to participate in the activities and trips of CTeen's Regional Event. In consideration of the opportunity of my/our child to participate in the activities of CTeen's event, I/we release CTeen, its officers, agents, employees, staff, and volunteers from any and all liability of any kind whatsoever for any loss or injury to my/our child arising from my/our child's participation in the activities of the CTeen event; and I/we agree to indemnify and hold forever harmless CTeen, its officers, agents, employees, staff, and volunteers from any and all liability of any kind whatsoever for loss or injury to my/our child arising from activities of the CTeen event or resulting from traveling to or from the activities.

Parent/Legal Guardian Signature: \_\_\_\_\_

Date \_\_\_\_\_