

### PRINCE OF PEACE CATHOLIC CHURCH

14818 W Deer Valley Dr. Sun City West, AZ 85375 Tel. (623) 214-5180 Fax (623) 584-2073

# CATHOLIC DAY CAMP JULY 22-25, 2024

I, (parent(s) or guardian)

\_\_, give permission for

ny children: Child's Name	Birth Date	100	Special people such as learning differences
Child s Nume	binn Dale	Age	Special needs such as learning differences,
			disabilities (Visible or invisible) or mental health
			concerns, allergies, or special diets.

to participate fully in any or all SCUBA Catholic Day Camp activities at Prince of Peace Catholic Church from July 22 – 25, 2024.

I do not hold Prince of Peace Catholic Church, its employees, volunteers, or anyone involved in inhouse or outreach activities liable for injury, sickness, death, or property damage whatsoever incurred or suffered by my son/daughter(s).

I also take full responsibility for transportation of my son/daughter(s) from any activity if by their choice of negative, illegal, or inappropriate behavior, the Director of Catechesis or volunteers deem it necessary for the students(s) to return home.

In an emergency in which medical treatment is required, I give permission to the Director of Catechesis and/or volunteer(s) to obtain a licensed physician. I wish to be notified immediately in an emergency.

Signature of Parent/Guardian:		_Date:	
Emergency Phone:			
Insurance Co. and Policy #:			
Family Physician:	Phone:		
Address:	City:	State:	

### STUDENT AGREEMENT:

I agree to respect the human dignity of those I encounter, knowing, just like me, they are a beloved child of God. I will respect that everyone is uniquely made with different personalities and likes.

I agree to respect my time in catechesis, and to use it to help me know, love, and serve God.

I agree to respect my catechists and the parish property. I will not purposely ruin parish items or other's belongings while on campus.

I agree to take full responsibility for my choices of negative, illegal or inappropriate behavior, and will comply with the above commitment of my parent/guardian to be notified if the Director of Catechesis deems it necessary for me to be sent home.

#### For students with cell phones:

<u>I agree NOT to use or take out my cell phone prior to, during or after the catechetical session, unless it is</u> <u>needed to contact your parent.</u> Use of the cell phone will be with a catechetical volunteer present.

I understand that not all parents want their children to have access to a cell phone nor want images or items from the internet shared with their child(ren) and will not use my cell phone in the presence of other students while on campus.

I understand that when instructed by the Director of Catechesis or an agent of the parish, I may be asked to use my cell phone in a time of emergency, i.e. call 911.

Child(ren)'s Signatures	Cell Phone?	2
	YES	NO
	YES	NO
	YES	NO
	YES	NO

## DIOCESE OF PHOENIX DEPARTMENT OF YOUTH MINISTRY PHOTO RELEASE

I hereby grant my consent to use and release to: The Catholic Diocese of Phoenix/Prince of Peace Catholic Church the use of my name and or my likeness or my child's name or likeness, whether in still, motion pictures, audio or video tape, photograph and/or other reproduction of me or my child, including voice and features, with or without names, in any promotional purposes involving the diocese or parish program, news features in the <u>Catholic Sun</u> or other media or other purpose whatsoever, except for the endorsement of any commercial products. I further agree that the Catholic Diocese of Phoenix may use or cause to be used, these items for all broadcasts, publications, or reproductions, without limitation or reservation of any fee.

I agree to allow any photos taken at Prince of Peace Catholic Church related events, in which my child(ren) may appear, to be used in flyers, newsletters, bulletins, web sites, or any sharing or promotional material for Prince of Peace Family Catechetical Ministry.

Date:	
Print Parent/Guardian Name:	
Print Child's Name: Parish/Program:	
Address:	
City:	
State:	

- I DO Give my permission to have my child or me photographed, videotaped, or featured in the parish bulletin, newspaper, or Catholic Sun.
- I DO NOT Want my child or I to be photographed, videotaped, or featured in the parish bulletin, newspaper, or Catholic Sun.

For more information or questions, please contact the Director of Catechesis, Nanci Lukasik-Smith, at (623) 344-7294 or via email at <u>nanci@popscw.org</u>.