



Mater Dei High School

1202 West Edinger Avenue
Santa Ana, California 92707-2191
714 / 754-7711

MATER DEI HIGH SCHOOL BLOCK 8 – OFF-CAMPUS EXTRA-CURRICULAR ACTIVITY PERMISSION FORM

I am the parent or legally authorized guardian of the child seeking to leave campus during Block 8 to attend an off-campus extra-curricular activity. On behalf of myself, my spouse, my child/ward (the "Participant"), and my/our heirs, personal representatives, and assigns, and in consideration for the Participant being allowed to take part in the Activity, I make the following representations. If I am the Participant and 18 years of age or older, I make these representations for myself.

I permit the Participant to leave campus during Block 8 to attend an off-campus extra-curricular activity including associated travel (the "Activity") for the 2020-2021 school year.

I will direct the Participant to follow all instructions and guidelines provided by School faculty, staff and Activity personnel during the Activity. Participant's conduct shall adhere to the requirements of the School Parent-Student Handbook and the mission and teachings of the School. Additionally, I will direct the Participant to travel immediately and directly to the Activity.

In consideration for the School allowing the Participant to participate in the Activity, I hereby release, waive, discharge, hold harmless, indemnify, and defend Mater Dei High School and the Catholic Diocese of Orange, as well as their respective employees, staff, volunteers, agents, and representatives, from any and all liability, losses, damages, claims, actions, legal fees, and causes of action of every nature, whether claimed by Participant, myself, Participant's family and assigns, or any third party, for any and all known or unknown, foreseen or unforeseen, bodily or personal injuries, property damage, or any other loss or damages relating in any way to the Participant's involvement in the Activity, including associated travel.

I agree to allow my child/ward to participate in the Activity.

By signing below, I represent that I have read, understand, and agree to the terms outlined above. I understand that by signing this document, I am waiving certain legal rights, and do so voluntarily.

Parent/Guardian Name: _____ **Parent Signature:** _____ **Date:** _____

Student Name: _____ **Student Signature:** _____ **Date:** _____

Student ID Number: _____ **Student Grade:** _____ **Student Cell Phone Number:** _____

Emergency Contact Name and Telephone Number: _____