

# Totus Tuus Liability Release

June 14-19

Please return Catholic Ministry Center-Megan Rust

824 Jefferson St Tell City, IN 47586

812-547-7994

## Liability Release

I grant permission for my child/ individual ("Participant") to participate in Totus Tuus 2026. I will not hold the Archdiocese of Indianapolis, or its parishes responsible in the event of any injury to the Participant while participating in Totus Tuus 2026 and/or traveling to and from the event. I warrant that, to the best of my knowledge, Participant is in good health and able to participate in all program activities.

(Please submit a statement indicating limitations and/or conditions of which we should be aware.)

Yes  No

I agree that Participant shall abide by the Youth Code of Conduct. I have reviewed and discussed the Code of Conduct with Participant prior to signing this form. I agree that if Participant fails to abide by the Code or engages in a serious infraction of the Code, he or she may be immediately dismissed from Totus Tuus 2026 with no refund and sent home at my expense.

I agree to Participants participation in Totus Tuus 2026  Yes  No

I grant permission for adult chaperones to take photos/videos of Participant that may be featured in future Ministry Digital Media, the Criterion, the Catholic Moment, etc.  Yes  No

I grant permission for adult chaperones to text/call my child as it pertains to Totus Tuus 2026

Yes  No

CHILD'S NAME \_\_\_\_\_ AGE \_\_\_\_\_

ADDRESS \_\_\_\_\_

(CITY) (STATE) (ZIP)

PHONE \_\_\_\_\_

PARENT NAME \_\_\_\_\_

PARENT SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_