



**SUMMER MINISTRY KICK OFF**  
**JUNE 10, 2018 – 6:00-8:00 PM | \$20 / person**

**2-HOURS OF FUN & FRIENDS WITH UNLIMITED:**

MINI-GOLF  
BATTING CAGES  
GO-CARTS

BASKETBALL  
SAND VOLLEYBALL  
SHUFFLEBOARD

CORNHOLE  
HORSESHOES

**MINOR CHILD OR WARD WAIVERS & RELEASES**

**Waiver & Release of Liability and Acknowledgment of Receipt of Ohio Department of Health Concussion Information**

This is to certify that I, as parent/guardian with legal responsibility for my minor child or ward, acknowledge that my child or ward will be engaged in activities that involve risk of injury at Soccer First, Inc., Field Sports, Inc., The Golf Center at SportsOhio, Inc., and/or SportsOhio, Inc. and that I do recognize and assume that risk, whether foreseeable or not reasonably foreseeable, on behalf of my child or ward, and consent on behalf of my child or ward, to his/her participation in activities and instruction at Soccer First, Inc., Field Sports, Inc., The Golf Center at SportsOhio, Inc., and/or SportsOhio, Inc. For myself and on behalf of my child or ward and his/her legal representatives, I hereby release and agree to indemnify Field Sports, Inc., Soccer First, Inc., The Golf Center at SportsOhio, Inc., SportsOhio, Inc., Steele Land Company their affiliates, administrators, directors, agents, coaches, and its employees, other participants, and sponsor agencies from any and all claims and damages instituting or arising out of my minor child's or ward's involvement or participation in the programs at Field Sports, Inc., Soccer First, Inc., The Golf Center at SportsOhio, Inc., and/or SportsOhio, Inc., whether or not arising as a result of the negligence of the operators of such facilities.

This is to further certify that I, as parent/guardian with legal responsibility for my minor child or ward acknowledge receipt of the Ohio Department of Health Concussion Information.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_ Cell Phone No. \_\_\_\_\_

Parent/Guardian Address \_\_\_\_\_

Parent/Guardian Email Address \_\_\_\_\_

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

**MEDIA RELEASE**

I hereby allow SportsOhio, Inc., and its affiliates (Soccer First, Inc., Field Sports, Inc., The Golf Center at SportsOhio, Inc.) to record and publish photos and videos (including audio) of myself or my minor child for the purpose of promoting SportsOhio and for documenting and/or reporting events and activities. I understand photographs, video and/or audio tape recordings may be taken of myself and/or family members at practice, during competition, recreational play, as well as other SportsOhio, Inc. related events. I understand that this media will be produced and used for promotional purposes and I authorize SportsOhio to use my/our photograph, video and/or audio recording on its website and social media platforms, such as Facebook, Twitter, YouTube, etc., as well as other official printed publications without further consideration. I also understand that once my and/or my family members' image(s) have been captured, and are posted on the SportsOhio website or social media platforms, the image(s) can be downloaded by any computer user on or off the premises of the sports campus.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

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

## DIOCESAN RELEASE AND INDEMNIFICATION AGREEMENT

A. As the above-named participant, I hereby register for and commit to attend the event listed on signature form. I further agree to the terms of this Release and Indemnification Agreement, and I agree to comply with the Code of Behavior set forth below. B. As a parent or guardian of the above-named participant, I give my permission for my child or ward to register for and attend the activity. C. The undersigned release from all liability, and indemnify and hold harmless St. Brigid parish, the Diocese of Columbus and any employee, agent or representative thereof from any and all liability, actions, causes of actions, claims, judgments, costs or expenses, arising out of or in any way related to injury, illness or loss incurred by the participant participating in or traveling to or from this activity.

### DIOCESAN CODE OF BEHAVIOR

1. Participants may not leave event prior to conclusion unless accompanied by an adult leader or parent/guardian. 2. The possession or use of alcohol, tobacco, drugs, or weapons of any kind is not permitted. 3. Participants must heed directions of leadership. 4. Participants must respect the rights and property of others. Damage to or defacing of property will be the financial responsibility of the participants involved and the participant's parents/legal guardians. 5. Failure to abide by this Code of Behavior may result in a request to parents/guardians, to transport offending participants from the premises, and the parents/guardians shall immediately comply with the request.

I HAVE READ, UNDERSTAND, AND AGREE TO ALL CONTAINED IN THE ST. BRIGID OF KILDARE YOUTH MINISTRY ACTIVITY CONSENT FORM AND DIOCESE OF COLUMBUS REGISTRATION RELEASE AND INDEMNIFICATION AND CODE OF BEHAVIOR.

Teen's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\$20 registration fee is due with this form by May 6, 2018**