

**Archdiocese of Los Angeles**  
**Adult Waiver and Release Form**

**Activity: St. Monica Trip To El Hogar Orphanage**

**Date : Saturday, January 6, 2018**

**Destination: Tijuana, Mexico**

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

Family Physician \_\_\_\_\_ Phone \_\_\_\_\_

Insurance Company \_\_\_\_\_ Policy No. \_\_\_\_\_

Allergies/Medical Problems/Special Needs \_\_\_\_\_

I wish to participate in the activity described above, and as a condition of my being allowed to do so, I, hereby release and discharge the Archdiocese of Los Angeles, its constituent organizations, including but not limited to the Roman Catholic Archbishop of Los Angeles, a corporation sole, St. Monica Parish and their officers, agents and employees from any and all claims for personal injuries or damage are caused by the negligence (active or passive), of any of the entities or individuals named or described above.

I hereby, warrant and represent that I am physically fit and capable of taking part in such activity. I make this warranty and representation on the basis of advice given me by a duly licensed medical doctor within the last six months, and I know of no change in my medical condition since advice that would affect the opinion of said medical doctor.

I agree to abide by the rules and regulations governing the above-described activity (attached as applicable) and to abide by the person or persons having supervision and control over the activity.

I, hereby, authorize the making of photographs, motion pictures, videotapes, recordings, or other memorializing of said event and my participation therein, and the publication or other use thereof. I hereby, waive any right to compensation therefore of any right that I otherwise might have to limit or control such making or use.

I warrant and represent that I am eighteen years of age, or over, and upon request will produce satisfactory proof of such fact.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Name:

Phone Number:

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