

Louisiana Camp Joshua 2011 Release Form

Which camp are you attending (CIRCLE ONE):

LAKE CHARLES

RUSTON

BATON ROUGE

While I understand that the Louisiana State Council of the Knights of Columbus, the Louisiana Right to Life Education Committee, Inc, and Louisiana Students for Life (hereafter referred to as sponsors) will take reasonable steps to provide individual care and safety for my child, I am aware that the above mentioned organizations, and their employees or agents cannot assume any responsibility for any injury, damage, or harm which might result during the course of participation in any activity connected to the Louisiana Camp Joshua Leadership Camp.

In consideration of permitting my child to participate, I agree that such responsibility will remain with me, as the parent or guardian of my child. Should any claim be asserted by any person, as a result of the acts of my child while participating in the activity described above, or traveling to, from or part of such activity, or should my child or children assert any claim against "the sponsors" or Supreme Council of the Knights of Columbus its employees , agents, or member, I agree to indemnify and hold "the sponsors" and the Supreme Council of the Knights of Columbus, its employees, members, or agents harmless from any such claim, including attorney fees and costs incurred in defense thereof.

I further authorize medical treatment of my child or children, in the event of illness or injury sustained in my absence while my child or children participate in the sponsors' Louisiana Camp Joshua Leadership Camp.

Child's Name _____

Parent's Signature _____

Date: _____

Parent's Printed Name: _____

*** If you (the attendee) are 18 years or older, please sign the above form inserting your name in both the parent/guardian and child blanks.

Fax to: (225)752-5065

Mail to: Knights of Columbus | 13644 Timberridge Ave, Baton Rouge, LA 70817