



# THE CATHOLIC DIOCESE OF COLORADO SPRINGS

## PERMISSION SLIP

I hereby give permission for my child/children, \_\_\_\_\_ to participate in the activity described below:

**Type of Activity:** Mountain Madness Middle School Conference

**Description of Activity:**

Every year 1100+ Middle School students (6-8<sup>th</sup> grade) gather at the YMCA of the Rockies in Estes Park to encounter God through a “mountain-top” experience. Each year we bring in a speaker/entertainer to host the weekend – this year we will be joined by Paul J. Kim. The high energy speakers, dynamic worship, fellowship and adoration help ignite a passion for Jesus in the young people which encourages them to live their faith in everyday life.

Due to Covid-19, we'll be offering the same amazing conference experience at parishes all across the Denver Metro Area. St. Mark will be hosting the event in-person and will have a Live Stream of the Conference where we'll be able to tune in for talks and presentations by all speakers throughout the day.

**Supervisor of Activity:** Youth Ministry Staff (Joe Heasley and Chloe Elder)

**Date and Time of Activity:** Saturday, February 13, from 9:00 AM to 8:00 PM

**Method of Transportation (if applicable):** Parents are responsible for transportation to and from St. Mark.

**Cost: (if applicable):** \$50 per person

My child or children has/have no medical or physical limitations which might limit his, her, or their participation in the activity other than those which I have described on the page which I have attached to this Permission Slip. As parent or guardian, I agree that I shall be fully responsible and liable for any injury, harm, or property loss or damage caused by my child or children during the activity. Should my child or children misbehave during the activity, I hereby give permission for the Supervisor of the Activity or his or her designee to direct my child to stop misbehaving, to take "time out," or to be returned home by appropriate means.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Emergency Phone Numbers

***Please return this form by:*** Monday, April 12, 2020