

**DIOCESE OF LA CROSSE - ST. OLAF FAITH FORMATION  
COMPREHENSIVE CHILD CONSENT AND RELEASE FORM  
Parental/Guardian Consent Form and Liability Waiver**

**PERMISSION TO USE PARTICIPANT PHOTOS:** You have my permission to use the photos of participants listed on the Religious Education Registration form for parish newsletters, bulletins, social media, etc.

Initials of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

**MEDICAL MATTERS:** I hereby warrant that to the best of my knowledge, my child(ren) is in good health, and I assume all responsibility for the health of my child(ren).

Initials of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

**EMERGENCY MEDICAL TREATMENT:** In the event of an emergency, I hereby give permission to transport my child to a hospital for emergency or surgical treatment. I wish to be advised prior to any further treatment by the hospital or doctor. In the event of an emergency, if you are unable to reach me at the numbers listed, contact:

Emergency Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship to family: \_\_\_\_\_

Family doctor: \_\_\_\_\_ Phone: \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_

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

**SAFE ENVIRONMENT TRAINING:** Go to the Diocesan website (<https://www.surveymonkey.com/r/safe-environment>) to complete the online training. You will be prompted to read information and watch video clips, then asked to acknowledge that you have done so. You will then be asked for your first and last name. This information is for record keeping only. If you are unable to access the information or links, please contact the Director of Faith Formation for help or paper copies.

**Please fill out and return to the Faith Formation Office the attached diocesan forms:**

Annual Verification of Safe Environment Training  
Confidential Questionnaire

Please return to the Faith Formation Office by **Wednesday, September 15, 2021** or mail to:  
PO Box 1203  
Eau Claire, WI 54702-1203

Please call or e-mail the Faith Formation Office with any questions:  
**Robin Johengen**, Director of Faith Formation  
715-832-2504 ext 103 / [rjohengen@saintolafparish.org](mailto:rjohengen@saintolafparish.org)