



**English Youth Group of Our Lady of Loretto Parish, Hempstead.**

**Saturdays : 10: 00am-12:00pm**

WHERE: Church Basement,

104 Greenwich Street, Hempstead, NY 11550

The meetings include games, talks, and much more

For more info contact parish office (516) 489-3675

Email: hempstead@identeyouth.us

or visit [www.identeyouth.us](http://www.identeyouth.us)

# Idente Youth

Ad Deum propter humanitatem

I hereby give my son/daughter permission to take part in the weekly meeting of Idente Youth at Our Lady of Loretto Church located at 104 Greenwich Street, Hempstead, NY 11550 on Saturdays from 10:00am - 12:00pm. If there is any change in time or location of meetings I will be duly notified. The meetings are conducted under the guidance of Idente Missionaries in collaboration with Idente Youth and Our Lady of Loretto Church. I understand that the meetings will have adult supervision, and reasonable and appropriate measures will be made to minimize risk or injury. I understand that I have to pick up my child **PROMPTLY** at 12:00PM unless I authorize them to return home on their own. In case of an emergency, he/she may be treated by a doctor. Should medical attention be required for my child, I will pay the expenses incurred. In case of accident, injury or loss, my family and I will not hold Our Lady of Loretto Church, Bishop John Oliver Barres, Diocese of Rockville Centre, Idente Missionaries, Idente Youth, or any affiliate/agent liable. I consent that any pictures/video taken of my child in connection with the event can be used for publicity, promotion, or television showing now or in the future, and I waive compensation in regard thereto.

Permission Given for (tick the box)

In person Meeting held in Church

Online meeting – Due to Bad weather (snow) or on special occasions this will be communicated to parents.

**Parents** Use this link to sign up for updates about Idente youth



Or Use Link -> [eva.us/oloretto-iyparents](http://eva.us/oloretto-iyparents)

Please tick once you have signed up

|                        |  |                  |  |                               |                                 |
|------------------------|--|------------------|--|-------------------------------|---------------------------------|
| Child's Name           |  |                  |  | <input type="checkbox"/> Male | <input type="checkbox"/> Female |
| Grade                  |  | School\College   |  | Date of Birth (MM/DD/YYYY)    |                                 |
| Parent/Guardian's Name |  |                  |  | Parent Mobile Number          |                                 |
| Parent's Email ID      |  | Child's Email ID |  |                               |                                 |
| Address                |  |                  |  | Zip Code                      |                                 |

|   |  |               |  |
|---|--|---------------|--|
| Emergency Contact (Other than parent or Gaurdian) |  | Mobile Number |  |
|---|--|---------------|--|

|  |                 |  |
|--|-----------------|--|
| If your Child can return on their own, please sign here.<br>or | Signature<br>-> |  |
|--|-----------------|--|

|   |   |               |  |
|---|---|---------------|--|
| My Child will be picked either by [Name & relationship with the Child]] | 1 | Mobile Number |  |
|   | 2 |               |  |

Parent's Signature:

Date :