



# Rockin' Jump

## The Ultimate Trampoline Park

Tues, Mar 26, 2019 6:00—8:30pm

Cost: \$15 for two hours of bouncing,  
dodgeball & rockclimbing fun!

Cash accepted or checks made out to St. Cecilia



### **Information:**

Get dropped off by 6:00pm at the Buffalo Grove location  
950 Busch Parkway, Buffalo Grove, IL  
Must be picked up by 8:40pm.

### **Before you come:**

- A parent or Legal Guardian **MUST** sign the waiver for you. No exceptions!
- Go to: <https://rockinjump.com/buffalogrove/>
- Click "sign waiver"
- Or go into the lobby to sign the waiver at any time
- No teen is admitted without a signed waiver
- Over 18 must have a photo ID with them.
- Water will be provided. You may bring \$ for snacks

**Bring a friend too! They do not have to be a parishioner  
but they do need to register.  
Grab an extra form for your friends!**

Permission forms are due by Thurs, Mar 21, 2019

Write checks to St. Cecilia Parish

Questions? Contact Kathy McGourty at 847.437.6208 or email:

[youthministry@stceciliamtprospect.org](mailto:youthministry@stceciliamtprospect.org)

Youth Permission Form Completed by Parent/Guardian for  
**Rockin' Jump Ultimate Trampolines ~ Mar 26, 2019**  
THE FOLLOWING FORM MUST BE COMPLETE FOR EACH PARTICIPANT

I give permission for my son/daughter (PRINT participant's name) \_\_\_\_\_ ( )  
First Last grade  
to participate in the March 26, 2019 Rockin' Jump Ultimate Trampoline Event sponsored by TCIA - Teen Catholics In Action. I hereby release and indemnify the Archdiocese of Chicago, St. Cecilia Parish & St. Alphonsus Parish for this event, its staff and volunteers; and the Catholic Bishop of Chicago, a Corporation Sole, from any and all liability arising from claims of any kind or nature whatsoever from my child's participation in the program. I understand that if my child violates any laws regarding possession of alcohol or drugs, or rules governing the event, I will be called and notified about situation and/or arrangements made to send my child home at my expense.

|                         |                                 |   |
|-------------------------|---------------------------------|---|
| Parent phone # _____    |                                 | e-mail address _____  |
| Yes _____               | No _____                        | St. Cecilia Parish may use photographs/videos of my child at this event for promotion in the bulletin/parish website/parish Facebook page |
| Student Signature _____ | Parent/Guardian Signature _____ | Date _____  |

**ROCKIN' JUMP ULTIMATE TRAMPOLINES WAIVER**

A parent or legal guardian must go online to sign the waiver by March 24 or youth will be denied access: <https://rockinjump.com/buffalogrove/> then click on "sign waiver" to complete. Or they may go to the lobby and sign the waiver in person. Participants over age 18 must have a photo ID.

**MEDICAL AUTHORIZATIONS**

In the event that the undersigned cannot be reached, and in the judgment of the responsible adults or other appropriate staff members accompanying the group. If there is a necessity for immediate examination and/or treatment of my child. I hereby authorize any of the aforesaid personnel to obtain for my child such medical services as are deemed necessary.

**I GRANT PERMISSION** for the adult chaperons for this event to administer non-prescription drugs as needed for my teen (aspirin, ibuprofen, antacids, etc.) \_\_\_\_\_ YES \_\_\_\_\_ NO

**EMERGENCY CONTACT**

**NAME OF EMERGENCY CONTACT** \_\_\_\_\_  
Relationship \_\_\_\_\_ Phone No. ( ) \_\_\_\_\_

**NAME OF PHYSICIAN** \_\_\_\_\_ Phone No. ( ) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**INSURANCE INFORMATION**

Policy in the Name of \_\_\_\_\_ Policy # \_\_\_\_\_

Insurance company \_\_\_\_\_ ID # \_\_\_\_\_

**HEALTH INFORMATION**

Allergies: \_\_\_\_\_ Current Med \_\_\_\_\_

Other Comments \_\_\_\_\_

**Return this completed form to the parish office by Fri, March 21, 2019**  
**Cash accepted or checks made out to: St. Cecilia Parish**