

John Carroll University  
**Assumption of Risk/Medical Consent/Release**

I would like to participate in the “Saint Benedict Joseph Labre Project” ministry to the homeless (“the activity”), which includes performing community service activities, offered by John Carroll University every Friday night, from 5pm to 11:00pm in Cleveland, Ohio. I understand there are risks involved with travel and service with the homeless population and the Cleveland area including, but not limited to: falls, accidents, use of tools, hazards to personal safety, the effects of the weather, including high heat and/or cold and/or humidity, traffic and conditions of the road, conditions of the service sites, including potential hazardous due to random banditry, carjacking, or criminal assaults but I want to do so, despite any risks and despite this Release.

In the event a medical emergency develops during this activity and I am unable to make decisions about my medical treatment, I authorize John Carroll University representative(s) in charge of this activity to act on my behalf. I understand and agree that any medical treatment authorized by the John Carroll University representative will be at my expense.

In exchange for the opportunity to participate in this activity, I personally assume all risks in connection with my participation in and travel to and from this activity. I release John Carroll University, its trustees, officers, agents, employees, and volunteers (“its representatives”), from any claims or causes of action for any personal injury or damage to personal property in connection with my participation and travel to and from this activity. I understand that this release covers and all claims against John Carroll University and/or any or its representatives including but not limited to negligence and or failure to supervise. I also understand that this Release binds me, my family, estate and/or heirs.

I understand that my behavior is subject to applicable John Carroll University policies while participating in and traveling to and from this activity.

I have read this Release. I fully understand it and agree to be legally bound by it.

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Participant Signature

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Printed Name

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Date

John Carroll University  
**Medical Emergency Form**

**Participant Information:**

Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_

Email Address: \_\_\_\_\_

**Emergency Contact Information:**

**Contact #1**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_

Work Phone: (\_\_\_\_) \_\_\_\_\_

Relationship: \_\_\_\_\_

**Contact #2**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_

Work Phone: (\_\_\_\_) \_\_\_\_\_

Relationship: \_\_\_\_\_

\*\*John Carroll University and/or my medical provider should be aware of the following medical conditions during this program (e.g. illness, chronic disorders or conditions, special accommodations, medical supplies, allergies, medications, etc.) Please list below or on back as needed.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Acknowledgements and Authorization for Treatment**

To the best of my knowledge, I affirm that the information provided on this emergency medical information form is true, complete, and accurate. In the event a medical emergency develops and I am Unable to make a decision about my medical treatment, I authorize John Carroll University representative(s) in charge of this program to act on my behalf. I understand and agree that any medical treatment authorized by the John Carroll University representative will be at my expense. I release the John Carroll University representative from any and all liability associated with any decision made in this regard.

\_\_\_\_\_  
Participant Signature

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

\_\_\_\_\_  
Date

John Carroll University  
Saint Benedict Joseph Labre Project  
Code of Conduct & Safety Guidelines

I understand that by choosing to volunteer through a project affiliated with John Carroll University I will act responsibly and consent to the following condition of this commitment.

- I will be punctual and conscientious in my attendance for the time of my volunteer activity;
- I will notify a supervisor in advance if I am unable to participate as scheduled;
- I will consider confidential all information concerning other people, students, and agencies/organizations;
- **I will not disclose personal contact information to those I encounter;**
- I will make my work the highest quality and accept supervision graciously;
- **I will conduct myself with dignity, courtesy, and consideration;**
- I will follow all guidelines or policies governing volunteers established by the agency with which I volunteer;
- I will cooperate with program assessment surveys or other forms of data collection;
- I will notify program leadership of any problems, emergencies, safety hazards, concerns, or suggestions regarding my activities;
- I will complete all assignments given to me by my supervisor regarding my activities;
- I will behave in a manner consistent with the Declaration of Students Rights and Responsibilities as described by the JCU Student Handbook;
- **I will stay with my group; I will not EVER go off on my own without consulting a coordinator;**
- **I will not carry money with me;**
- **I will not bring valuables;**
- **I will avoid wearing flashy jewelry and watches;**
- I will be patient and flexible. I understand that for logistical or security reasons, the program of events may change at any time;
- I will maintain a professional and neutral image. This will reduce the risk of confrontation;
- Regardless of my age, I will not consume alcoholic beverages before or during participation in this activity.

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Participant Signature

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Printed Name

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Date

## **The Saint Benedict Joseph Labre Project**

*Our Mission: To build friendship with the homeless and poor on the streets of Cleveland through the distribution of food and other practical goods.*

### *Who was Benedict Joseph Labre?*

Benedict Joseph Labre was born into a middle-class French family in 1748. After spending his youth discerning his vocation in various monasteries, he decided that his calling was to be a destitute pilgrim praying before the Blessed Sacrament in the Churches of Europe. His only possessions were a Rosary, the New Testament, a Breviary, and a copy of *The Imitation of Christ*. Eventually, Labre settled in Rome where he lived among the homeless under the arches of the Coliseum. Labre was called the “Poor Man of Forty Hours” because of his unceasing adoration of the Blessed Sacrament. Labre lived in extremely harsh conditions among the poor and in service to his brothers and sisters of the streets. In 1783, Labre died at the young age of 35 after he collapsed on the steps of Santa Maria dei Monti in Rome. Labre was canonized a Saint in 1881.

### *What is the Labre Project?*

The Labre Project started on Sunday, January 5, 2003 when a small group of teachers and students from St. Ignatius High School went downtown in a car handing out sandwiches to homeless people they encountered sleeping on the streets. In October of 2004, the Labre project was brought to John Carroll University by a group of St. Ignatius Alumni, and groups of students continue the tradition on Friday nights

### *What Can I expect on Labre?*

Expect the unexpected. Leave behind any stereotypes about the homeless. Labre has the potential to be a remarkable, moving, and enlightening experience; be open to it. We represent John Carroll University, but most importantly, we represent Jesus Christ. We share food, but more importantly, we share friendship. Tell our homeless friends your name, offer them a handshake, and share a story together.

### *What is the Schedule?*

3:30 PM: Meet at the Labre kitchen in the Green Road Annex to help prepare for the night.  
5:00 PM: Reflection in front of the Blessed Sacrament in the Rodman Hall Chapel. (Meet us in front of Rodman Hall if you aren't sure where the Chapel is.)  
5:30 PM: Depart for downtown Cleveland on two separate routes to the East & West sides.  
9:00 PM: Both vans meet at Public Square; the final stop of the night.  
10:00 PM: Return to JCU, close with group prayer, and clean up; done around 11:30 PM.

### *What should I bring?*

Bring your driver's license along with you, because we may be entering buildings that require ID. Wear closed-toed shoes and dress warmly – it can get very cold at night. Other than that, please bring an open mind and an open heart.

*Poor in the Eyes of men and women, Rich in the Eyes of God;*

*Saint Benedict Joseph Labre...Pray for us.*