



Calvary Baptist Church Children`s Ministry

Waiver and Release of Liability Form

Effective JUNE 2017 – AUGUST 2018

I, _____ (parent/Guardian if minor), acknowledge that I am aware of and have investigated to the extent necessary all dangers and risks inherent in the activity listed above including the risk of serious bodily injury or death. I believe that I am (or the participant named above, if minor, is) healthy and physically able to participate safely in these activities. I agree to indemnify and hold harmless, Calvary Baptist Church and its officers, agents, servants, volunteers, or employees from any liability arising from participation in the activity listed above. It is further acknowledged that any Calvary Baptist Church activity may involve transportation in a personal vehicle, van or a bus and that transportation is considered part of the activity itself and is thus covered under this agreement. The terms of this release form shall be construed as the entire agreement and may not be altered, amended, or modified except in writing and signed by both parties.

Participant or Parent/Guardian Initials _____

I/we the undersigned, (if minor, parents/guardian) hereby grant permission and authority to Calvary Baptist Church, and its officers, agents, servants, volunteers, or employees to act for us in executing verbal instructions or if unable to contact us, to act for us in dealing with physicians, available ambulance companies and hospitals, to obtain, prompt medical attention for the participant named above in the event of any perceived medical emergency. I hereby covenant and agree to release Calvary Baptist Church, it's leaders, employees, agents, volunteers and/or officers and hold harmless from liability for any injury or damage sustained while participating in the activity listed above, or participating in any activity sponsored by Calvary Baptist Church and from any liability connected with obtaining prompt medical attention for the named above. It is further understood that I will be responsible for the costs of all medical services obtained pursuant to this authorization.

Participant or Parent/Guardian Initials _____

In connection with participation in the above listed event/activity, I/we understand, (if minor, parents/guardian) hereby grant to Calvary Baptist Church, its successors and those under its authority the right to use participant's first name, image and/or interviews in all forms of media including advertising and related promotion. I/we grant this right without compensation and release to Calvary Baptist Church, its successors and those acting under its authority from any claim that may arise regarding such use, including claims of defamation, invasion of privacy, or infringement of rights of publicity or copyright.

Participant or Parent/Guardian Initials _____

I/we the undersigned (if minor, parents/guardian) hereby confirm that the participant listed above has health insurance coverage that is effective as of the date of the activity listed above.

Participant or Parent/guardian Initials _____

I/we the undersigned (if minor, parents/guardian) hereby confirm that either: The participant listed above is covered by a life insurance and a disability insurance policy that is effective as of the date of the activity listed above - **OR** -The participant listed above does not have a life insurance and/or disability insurance policy. I/we understand that we personally will bear the risk of injury, disability or death that is associated with participation in the activity listed above and will indemnify and hold harmless Calvary Baptist Church as acknowledged above.

Participant or parent/guardian Initials _____

Calvary Baptist Church is not responsible for loss or theft of personal belongings.

Participant or parent/guardian Initials _____

Photo Release Form for Minors (if under 18)

Calvary Baptist Church has my permission to use my or my child's photograph publicly to promote Calvary Baptist Temple of Cherokee County Incorporated. I understand that the images may be used in print publications, online publications, presentations, websites, and social media. I also understand that no royalty, fee, or other compensation shall become payable to me by reason of such use.

Participant or parent/guardian Initials _____

Misconduct may result in transportation home from an activity at parent's expense. A student dismissed for disciplinary reason will not receive a refund of the activity fee.

Participant or parent/guardian Initials _____

If under the age of 18, the parent or guardian must read and initial each section and sign below, indicating his/her acceptance. This agreement covers all Children`s Ministry activities, retreats, and missions trips for one year from the date signed below.

Child's Name (print) _____

Parent/Guardian Name (print) _____

Parent/Guardian Signature _____ **Date:** _____

Parent/Guardian Phone # _____

Address _____

In Case of an Emergency

Emergency Contact _____

Phone # _____

Physician _____

Phone # _____

Allergies _____