

Grace Church of La Verne Liability Release Form

In consideration for being accepted by Grace Church of La Verne for participation in all activities, we (I), being 18 years of age or older, do for ourselves (myself) [and for and on behalf of my child-participant if said child is not 18 years of age or older] do hereby release, forever discharge and agree to hold harmless Grace Church of La Verne and the directors thereof from any liability, claims or demands for personal injury, sickness or death, as well as, property damage and expenses, of any nature whatsoever which may be incurred by the undersigned and the child participant that occur while said child is participating in a church-sponsored activity.

Furthermore, we (I) [and on behalf of our (my) child-participant under the age of 18 years] hereby assume all risk of personal injury, sickness, death, damage and expense as a result of participation in recreation and work activities involved therein.

Further, authorization and permission is hereby given to said church to furnish any necessary transportation, food and lodging for said participant.

The undersigned hereby agrees to hold harmless and indemnify said church, its directors, employees, and agents, for any liability sustained by said church as the result of the negligent, willful, or intentional acts of said participant, including expenses incurred attendant thereto.

For participants under 18 years:

I (we) am the parent(s) or legal guardian(s) of this participant, and hereby grant my (our) permission for participation in said events, and hereby authorize and give permission to seek medical treatment or attention, including but no limited to emergency surgery or medical treatment, and assume responsibility for all medical bills, if any. Should it be necessary for the participant to return home due to medical reasons, disciplinary action or otherwise, I (we) hereby assume all transportation costs.

Further, I (we) [and on behalf of my child-participant] authorize the use of any video, digital pictures, and voice recordings for use in promotional material and/or the Grace Church Web site.

Printed Name of Participant Age Date of Birth

Participant's Home Address (Street, City, State, Zip)

Mother's Name Father's Name Home Phone

Mother's Cell Phone Father's Cell Phone Other

Insurance Company Policy #

Mother's Signature Date Father's Signature Date



Grace Church of La Verne Student Ministry