

THE FIRST BAPTIST CHURCH OF NAVASOTA
ASSUMPTION OF RISK, RELEASE OF LIABILITY AND WAIVER OF CLAIMS
INDEMNITY AGREEMENT AND PARENTAL CONSENT

PLEASE READ CAREFULLY

BY SIGNING THIS FORM YOU MAY GIVE UP CERTAIN LEGAL RIGHTS

CONSENT OF PARENT/GUARDIAN IS REQUIRED FOR PARTICIPANTS WHO ARE NOT 18 OR OLDER

TO: FIRST BAPTIST CHURCH OF NAVASOTA

RE: ACTIVITIES FOR AND INVOLVING CHILDREN/YOUTH

Please print carefully

NAME OF PARTICIPANT: _____ GRADE: _____

ADDRESS OF PARTICIPANT: _____

PHONE NUMBER: _____ - _____ - _____ CELL PHONE: _____ - _____ - _____

BIRTH DATE: _____ HEALTH CARE NUMBER: _____

E-MAIL: _____

FAMILY DOCTOR: _____ PHONE NUMBER: _____ - _____ - _____

EMERGENCY PERSON: _____

RELATIONSHIP: _____ PHONE NUMBER: _____ - _____ - _____

ALTERNATE CONTACT PERSON: _____

RELATIONSHIP: _____ PHONE NUMBER: _____ - _____ - _____

HEALTH CONCERNS (PLEASE IDENTIFY ANY ALLERGIES, HEALTH PROBLEMS, MEDICATIONS, OR OTHER HEALTH CONCERNS):

DISCLAIMER

The First Baptist Church of Navasota and its leaders, directors, officers, employees, contractors, agents, volunteers, members and representatives (collectively referred to as "the CHURCH"), are not responsible for any injury loss or damage of any kind whatsoever sustained by any person or their property while participating in events, activities or travel with the "CHURCH", including injury, loss or damage.

ASSUMPTION OF RISKS

IN CONSIDERATION OF the "CHURCH" and all related activities associated with the "CHURCH" including participation in the activities for children and/or youth from January 1, 2012 through December 31, 2013 inclusive, and all activities related to children and youth (collectively referred to as "Activities), I acknowledge that I am aware of the possible RISKS, DANGERS AND HAZARDS associated with participation in the Activities including the possible risk of severe or fatal injury to myself or others. These risks include but are not limited to the following:

- The risks associated with traveling to and from the activities by means of private or public transportation, which may include but are not limited to a motor vehicle accident resulting in physical injuries or death.
- The possibility of personal injury incurred while using private or public transportation for travel to and from the Activities, including being knocked down or being involved in a physical confrontation whether caused by myself or someone else.
- Medical problems arising before, during or after the activities.
- Failure to follow the instructions or directions of the persons in charges of the Activities I, for myself or my child, voluntarily accept and fully assume all such risks, dangers and hazards and the possibilities of personal injury, death, partial or permanent disability, property damage or loss resulting from my or my child's participation in the Activities.

RELEASE OF LIABILITY and AGREEMENT

IN CONSIDERATION OF the CHURCH allowing me or my child to participate in the Activities, I agree on behalf of myself and/or my child:

1. TO ASSUME and ACCEPT ALL RISKS arising out of , associated with or related to my or my child's participation in the Activities.
2. TO WAIVE and RELEASE the CHURCH from any and all liability from any loss, damage, injury or expense that I or my child may suffer, or that my next of kin may suffer as a result of my or my child's participation in the Activities due to any cause whatsoever.
3. TO INDEMNIFY and HOLDD HARMLESS the "CHURCH" from any and all liability for any damage to the personal property of, or personal injury to, any third party resulting from my or my child's participation in the Activities.
4. TO INDEMNIFY and HOLD HARMLESS the "CHURCH" from any and all claims, demands, actions and costs for any loss, injury, damage or expense whatsoever that might arise out of my or my child's participation in the Activities.

YOUTH PARTICIPATION CONSENT

ACKNOWLEDGMENT OF PARTICIPANT:

- I. I the undersigned Participant, understand that I am responsible to act in a safe and responsible fashion, to follow the instructions or directions of the persons in charge of the Activities, and to obey request to comply with safety regulations as directed by the persons in charge of the Activities, including designated leaders and drivers of private or public transportation. I will be solely responsible for myself, will wear a seat-belt when available and will not disturb or distract the driver when using private or public transportation to travel to and from Activities. At all sports events or other activities, I acknowledge that it is my responsibility to obtain and wear appropriate safety equipment. I will not endanger the safety of myself or others at any activities, or outings or sports events or when using private or public transportation for travel to and from such activities.

Acknowledgement of Parent or Guardian of participant:

We, the undersigned Parents or Guardians of the Participant, hereby authorize and consent to the Participant's involvement in the Activities, including any use of private or public transportation deemed necessary by the persons in charge of the Activities for Participants travel to and from Activities, or the NEAREST SUITABLE MEDICAL or HOSPITAL FACILITY in the event that emergency or other medical treatment not available at the site of the Activity is deemed advisable. We hereby consent to and authorize such emergency or other medical treatment of the Participant as may be deemed advisable in the event of an accident, injury, or illness during the Activities.

ACKNOWLEDGMENT and SIGNATURE

I UNDERSTAND THAT THIS IS A LEGAL AGREEMENT that is binding upon myself and my heirs, executors, administrators, successors and assigns. I HAVE READ AND UNDERSTAND THE TERMS OF THIS AGREEMENT and I ACKNOWLEDGE THAT by signing this agreement voluntarily, I am agreeing to abide by its terms and I am waiving certain legal rights that I or my child may have.

This Consent, Authorization and Acknowledgment shall be effective from and including

January 1, 2012 to and including December 31, 2013

Parent/Guardian: _____ Print _____ Date _____

Participant Name: _____ Print _____ Date _____

Notary: _____ Print _____ Date _____