

**LIABILITY RELEASE FORM**

**Release of All Claims**

In consideration for being accepted by St. Andrew Presbyterian Church for participation in \_\_\_\_\_ (Name of trip or activity) we/I, being 18 years of age or older, do 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 St. Andrew Presbyterian Church and the directors thereof from any and all liability, claims of 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 the above described trip or activity.

Furthermore, we/I (and on behalf of our (my) child-participant if 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 this participant.

The undersigned further 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.

(If the participant has not attained the age of 18 years):

We/I are/am the parent(s) or legal guardian(s) of this participant, and hereby grant our/my permission for him/her to participate fully in said trip or activity, and hereby give our/my permission to take said participant to a doctor or hospital and hereby authorize medical treatment, including but not in limitation to emergency surgery or medical treatment, and assume the responsibility of all medical bills, if any.

Further, should it be necessary for the participant to return home due to medical reasons, disciplinary action or otherwise, we/I hereby assume all transportation costs.

(Only participant need sign if 18 years of age or older. If participant is under 18, both parents must sign unless parents are separated or divorced in which case the custodial parent must sign.)

Date: \_\_\_\_\_ Name of Participant \_\_\_\_\_

Signatures: Father \_\_\_\_\_ Mother \_\_\_\_\_

Legal guardian \_\_\_\_\_

Participant, if age 18 \_\_\_\_\_

Parent(s) telephone \_\_\_\_\_ Pastor's telephone \_\_\_\_\_

Hospital Insurance \_\_\_ Yes \_\_\_ No Name of Insurance Co. \_\_\_\_\_  
Policy number \_\_\_\_\_

Physician \_\_\_\_\_ Physician's phone \_\_\_\_\_

Emergency phone #'s \_\_\_\_\_

Trip/Activity Participant Only

I have read the foregoing and understand the rules of conduct for participants and will abide by them as well as the directions of the leadership of the trip.

Participant signature \_\_\_\_\_