



WAIVER AND RELEASE FORM

If you are under 18 your parent or legal guardian must sign this waiver. Participant Release of Liability

READ BEFORE SIGNING: In consideration of being allowed to participate in any way in the skate park for Forty-one Ministries, Family Life Fellowship, related events, activities, and all other sanctioned events and activities, the undersigned acknowledges, appreciates, and agrees that:

- 1. The risk of injury from the activities involved in these programs is significant, including the potential for permanent disability and death, and while particular rules, equipment and personal discipline may reduce this risk, the risk of serious injury to me does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASED PARTIES or others, and I assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If I observe any unusual significant concern in my readiness for participation and/or in the program itself, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
4. I HEREBY RELEASE AND FOREVER DISCHARGE Forty-one Ministries, Family Life Fellowship, and its officers, officials, agents and/or employees, other participants, sanctioned events, sanctioned parks, sanctioned organizations, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("Released Parties"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property incident to my involvement or participation in these programs, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASED PARTIES OR OTHERWISE, to the fullest extent permitted by law.
5. I, for myself and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY INDEMNIFY AND HOLD HARMLESS all the Released Parties from any and all liabilities arising in any way from my involvement or participation in these programs, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent permitted by law.
6. We (I) understand that the officers, officials, agents, other participants and employees of Forty-one Ministries, Family Life Fellowship, will be inviting me or (my) our student(s) to Bible studies and to church. While at any Forty-one Ministries, Family Life Fellowship, location or event, (my) our student(s) has permission to participate in worship services, Bible studies or any other activities that may pertain to the Christian faith.
7. We (I) authorize the personnel of Forty-one Ministries, Family Life Fellowship, in whose care the minor has been entrusted, to consent to any X-ray examination, anesthetic, medical, surgical or dental diagnosis or treatment and hospital care to be rendered to the minor under the general or specific supervision and on the advice of any physician or dentist licensed in the state where such diagnosis, treatment and care are provided, whether diagnosis or treatment is rendered at the office of a physician or at a clinic or hospital.
8. Should it be necessary for our (my) child to be transported by emergency vehicle due to medical reasons or otherwise, the undersigned assumes and agrees to pay all transportation costs.
9. The undersigned shall be liable and agrees to pay all costs and expenses incurred in connection with the medical authorization provided in this document.
10. We (I) hereby grant Forty-one Ministries, Family Life Fellowship, the absolute right and permission to copyright and use, re-use, publish, and re-publish photographic portraits or pictures of me or our (my) child or in which I or our (my) child may be included in whole or in part, or composite or distorted in character or form, without restriction as to changes or alterations, in conjunction with our (my) child's own or fictitious name, made through/for any medium for use in any art, advertising, trade, or any other purpose whatsoever. I also consent to the use of any material printed in conjunction therewith. I hereby waive any right that I or the minor may have to inspect or approve the finished product or products or the advertising copy or printed matter that may be used in connection therewith or the use to which it may be applied.
11. Students will be sent home at the expense of the parent if, after being given one warning, students continue to break the rules and/or guidelines set by Forty-one Ministries, Family Life Fellowship.

X _____
Participant's Signature Date Signed Grade Date of Birth Male / Female

Interests: Skateboarding/BMX/Inline Rock Climbing Gaming Basketball Concerts Ladies Events God

Family Life Fellowship is a non-profit organization and is open to persons of all races and national origins. Join our E-list: YES___ NO___

For purposes of certain grants, the following information may be helpful:
Race: African-American___ Caucasian___ Native-American___ Hispanic___ Asian___ Other___

Participant Name (printed): _____ E-mail: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Phone: (_____) _____ Church: _____ School: _____

X _____
Parent/legal guardian signature (if participant is under 18 years of age) Date signed Driver's license # or identification

Parent/Legal Guardian Name (printed): _____ Name of Emergency Contact: _____

Emergency Phone: (_____) _____ Allergies: _____ Medical Conditions: _____

Witness: _____ Date: _____

Subscribed and sworn to before me this ____ day of _____, 20__

My commission expires: _____

Printed name of Notary Public: _____

Signature of Notary Public: _____

For Notary Public:
NOTE: ALL RELEASE FORMS MUST BE NOTARIZED IF NOT SIGNED IN THE PRESENCE OF FORTY-ONE MINISTRIES, FAMILY LIFE FELLOWSHIP, STAFF.