

THIS FORM MUST BE FILLED OUT COMPLETELY

EFCC Activity/Trip Release, Waiver, Indemnity and Assumption of Risk Agreement

We at Emmanuel Faith Community Church (EFCC) request that all participants read and sign this Release, Waiver, Indemnity and Assumption of Risk Agreement to indicate that they have accepted all risks personally when participating in sporting activities, music department outings, mission trips, and youth outings sponsored by EFCC, including travel to these activities (collectively "Participation"). We strongly encourage anyone without medical insurance coverage not to expose themselves and EFCC to the financial ramifications of possible injury from Participation.

The undersigned agrees as follows:

I fully understand and acknowledge that there are risks and dangers associated with Participation which could result in property or bodily injury, partial and/or total disability, paralysis and death. These risks and dangers may be caused by my action, inaction or negligence or that of other third parties, including the Released Parties, as described below. There may also be other risks and dangers which are unknown or not reasonably foreseeable at this time.

I accept and assume the risk and responsibility for any losses and/or damages for any such injury, disability, paralysis or death, however caused and whether caused in whole or in part by the negligence of the Released Parties.

I hereby release, waive, discharge and agree not to initiate any form of legal action against EFCC, its pastors, elders, officers, agents, employees and volunteers (collectively "Released Parties") for any and all rights, claims, liabilities, lawsuits, damages, and expenses, including attorneys' fees, of any kind, known or unknown, existing or arising in the future, including those arising from negligent conduct of the Released Parties ("Claims and Damages") which I have or may have in the future against Released Parties resulting from or related to my Participation.

I further agree to indemnify and hold the Released Parties harmless against any Claims and Damages arising out of or in any way connected with my Participation.

MY SIGNATURE BELOW INDICATES THAT I HAVE READ THIS ENTIRE DOCUMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT IT AFFECTS MY LEGAL RIGHTS, AND AGREE TO BE BOUND BY ITS TERMS.

PRINTED NAME OF PARTICIPANT

SIGNATURE OF PARTICIPANT OR PARENT/GUARDIAN IF PARTICIPANT IS UNDER 18

____/____/____
DATE

PARENT OR GUARDIAN'S ADDITIONAL INDEMNIFICATION

(Must be completed by legal guardian for participants under the age of 18)

In consideration of _____ (print minor's name) being permitted by EFCC to participate in this activity, I acknowledge that I have read and understand the attached Activity/Trip Release, Waiver, Indemnity and Assumption of Risk Form, agree to be bound by its terms, and further agree to indemnify and hold Released Parties harmless from any and all Claims and Damages which are brought by, or on behalf of Minor, and which are in any way connected with such Participation by Minor. If I cannot accompany the Minor in this event, I authorize **the EFCC Faith Kids (EFCC Children's Ministry) staff person(s), or their representatives, in charge of this activity/trip/camp to accompany and take full responsibility** for the minor.

Parent or Guardian signature: _____

Print Name: _____

***Digital pictures and videos are taken during student activities. These pictures and/or videos may be used on the Emmanuel Faith Community Church Faith Kids (Children's Ministry) web pages, in printed church publications (examples: newsletters, worship folder, etc.), and/or in on screen/video/web site/Facebook ministry reports, etc. Student and parent (if under 18) must sign and date to authorize digital pictures or video of students to be used in these EFCC communications vehicles. Pictures will not include student's name or any other form of identification (unless specifically requested for items like newsletter articles).**

I authorize digital pictures and/or video of my child to be included on the EFCC web site or in other communications pieces:

*Parent/Guardian signature _____

Date ____/____/____

OVER

PAGE 2

Camper registration is not finished until both the EFCC required forms are completed and returned with a copy of health insurance card to the Faith Kids office.

3rd-5th Grade Winter Camp Registration

Camper's Name _____ Circle: Boy Girl

Birth Date ____/____/____ School Grade Now _____ Age _____

CABIN PARTNERS 1. _____ 2. _____

Emmanuel Faith Community Church Children's Ministry Medical Release Form

Parents/Guardians living with child _____

Address _____ City _____ Zip _____

Email _____ Home Phone (____) _____ Cell Phone (____) _____

If parent/or legal guardian is not available in case of emergency, please contact:

Name _____ Relationship _____

Home Phone (____) _____ or Cell Phone (____) _____

Your registration is not complete until all of the medical information (below) is filled out:

Primary Doctor _____ Phone (____) _____

Medical Insurance Company _____

Policy # _____ Insurance Company's Phone (____) _____

Please include a copy of your insurance card with this release

Allergies: _____

Special Needs: _____

Medication Allergies: _____

Do we have permission to give your child (circle): Tylenol/Ibuprofen? Yes No Dimetapp? Yes No

BRIEF MEDICAL HISTORY AND/OR SPECIFIC INSTRUCTIONS OR INFORMATION TO PHYSICIAN OR NURSE concerning any specific physical or mental condition or medications they should be aware of.

Any restrictions? _____

I (we), the parents/guardians of the aforementioned student, do hereby authorize Emmanuel Faith Community Church (EFCC) as agents for the undersigned to consent to any x-ray examination, anesthetic, medical or surgical diagnosis treatment and hospital care which is deemed advisable by and is to be rendered under the general or specific supervision of any physician or surgeon licensed under the provision of the Medical Practice Act on the medical staff of a licensed hospital, whether such diagnosis or treatment is rendered at office of said physician or hospital.

It is understood that this authorization is given in advance of any specific diagnosis, treatment or hospital care being required but is given to provide authority and power on the part of aforesaid agents to give specific consent to any and all such diagnosis or treatment deemed advisable. This authorization shall remain effective unless revoked by you.

I, the undersigned, being the parent/guardian of the aforementioned, have read and understand the above. I will keep you updated on any changes on child's release form.

Signature of parent or guardian if participant is under 18

_____/_____/_____
(Date)

Contract # _____



Camp & Retreat Ministries

California-Pacific Conference

THE UNITED METHODIST CHURCH

CAMP WAIVER, RELEASE AND INDEMNIFICATION AGREEMENT

In consideration of being permitted to participate in recreational activities made available to participants at Lazy W Ranch, Camp Cedar Glen, Camp Wrightwood, Colby Ranch, and Aldersgate Retreat Center and their sponsored programs (collectively "Cal Pac Camps"), including activities that may include Archery, Rock Climbing, Climbing Tower, Mountain Boarding, Horseback Riding, Swimming, Surfing, Hiking, High Ropes, Zipline, Bouldering, and/or other activities that may be hazardous or otherwise involve a risk of physical injury or death (the "Activities"), I HEREBY ACKNOWLEDGE AND AGREE TO THE FOLLOWING:

1. I have reviewed the Cal Pac Camps website (www.calpacumc.org/campandretreat) and the Activities available at the camp I will be attending.
2. I am fully aware of the risks and hazards inherent in the Activities, and I expressly and voluntarily assume any and all risks of bodily injury, death or property damage arising from or relating to the Activities. I waive and release any and all actions, claims, suits, losses or expenses (including court costs, attorneys' fees, and consultants' fees), or demands of any kind or nature whatsoever against The California-Pacific Annual Conference of The United Methodist Church, including Cal Pac Camps, and its/their directors, officers, employees, corporate affiliates, contractors, vendors, agents, sponsors, volunteers or representatives of any kind (collectively "Releasees") arising from or relating in any way to my voluntary participation in the Activities, and activities incidental thereto wherever or however the same may occur.
3. I understand that this Waiver, Release and Indemnification Agreement means, among other things, that I, and/or my family, heirs, executors, legal or personal representatives, successors and assigns, cannot under any circumstances sue Releasees or any of them for damages relating to or caused by my injuries, death, or property damage, whether or not caused by the negligence of the Releasees.
4. Releasees shall not be liable for any bodily injury, death, or property damages arising from any act or neglect of any other occupant or user of the Cal Pac Camps premises or of any other participant in the Activities.
5. I agree to indemnify, protect, defend and hold harmless Releasees or any of them, and their subrogees, if any, in the event of any loss, damage or claim arising from or relating in any way to my participation in any of the Activities. If any action or proceeding is brought against Releasees by reason of any of the foregoing matters, I shall upon notice defend the same at my expense by counsel reasonably satisfactory to Releasees, and Releasees shall cooperate with me in such defense.
6. Cal Pac Camps is authorized to provide or obtain medical care for me in the event of an injury. I understand I am solely responsible for all related costs associated with any medical care that is provided to me.
7. Photographs may be taken during the Activities to be used for promotional material for Cal Pac Camps. I grant Cal Pac Camps and the California-Pacific Annual Conference of The United Methodist Church the right to use, reproduce, assign, and/or distribute photographs, films, videotapes, and sound recordings of me for use in any materials created for purposes of promoting Cal Pac Camps, without any expectation of compensation for such use of my image or likeness. Yes No
8. If a portion of this Agreement is deemed invalid or unenforceable by a Court, then that provision shall be deemed severable from this Agreement and shall not affect the validity and enforceability of any remaining provisions.
9. This document constitutes the entire agreement between the parties and may be amended only in writing.

I ACKNOWLEDGE THAT I HAVE READ THIS WAIVER, RELEASE AND INDEMNIFICATION AGREEMENT, AND I FULLY UNDERSTAND ITS TERMS AND CONDITIONS, AND I ASSUME ALL OF THE RISKS OF PARTICIPATING IN THE ACTIVITIES.

Participant's Printed Name: _____ Age: _____

Participant's Signature: _____ Date: _____

For the parent/legal guardian of a minor under eighteen (18) years of age OR the parent/legal guardian of an incapacitated and/or mentally challenged person with legal responsibility for this Participant: I acknowledge that I have the legal capacity and authority to act on behalf of the Participant and hereby join in this Waiver, Release and Indemnification Agreement, including, for myself and on behalf of the Participant, agreeing to the foregoing acknowledgment and agreement to assumption of risks, representations and agreements, including agreements of release and indemnity, to the maximum extent allowed by law.

Parent/Legal Guardian Printed Name: _____

Parent/Legal Guardian Signature: _____

Date: _____ Relationship to Minor: _____

Emergency Phone Number: _____