

Vacation Kids Mission Camp
June 11-15, 2018

RELEASE OF ALL CLAIMS, WAIVER OF LIABILITY, AND HOLD HARMLESS AGREEMENT

I hereby give permission for my child, _____, to attend St. Michael's and The Church of the Resurrection's Kids Mission Camp and, to participate in all activities. I also give permission for emergency medical treatment to be administered to my child, and for medical treatment decisions to be made by the staff of The Church of the Resurrection and/or St. Michaels on this event. I understand that attempts will be made to contact me in the event of an emergency.

In exchange for and in consideration of the benefits to me and my child in my child being permitted to participate in the Kids Mission Camp, I hereby for my child and on my own behalf release, waive, and covenant not to sue the "Releases", defined to include St. Michaels Church and The Church of the Resurrection and anyone acting in its behalf, including but not limited to the staff, leaders, and volunteers of St. Michael's Church and The Church of the Resurrection and the organizations at which my child will be and/or serve, from any and all liabilities, claims, demands, or causes of action that I or my child have by reason of any participation in the aforesaid activity, and agree to indemnify, hold harmless, and defend the Releases from all claims that might arise as a result of my child's engaging in the aforesaid activity, whether caused by the negligence of the Releasees otherwise.

I acknowledge that I understand that the program will be conducted at _____ .

I acknowledge that I have read this agreement and voluntarily sign it. I further acknowledge that no oral representations, statements, or inducements apart from the foregoing written agreement have been made by or on behalf of the Releasees.

I am at least 18 years old and have full legal capacity to execute this agreement.

Parent's Name _____

Email address _____

Parent's Signature _____ date _____

Phone# _____

Insurance Co. and ID # _____