

USE AND RELEASE OF LIABILITY AGREEMENT

(this document will affect your legal rights, please read carefully)

In consideration of being allowed the use of or the participation in any event program or activity held in/on/at/or sponsored by The Church or facilities, I agree on behalf of myself, my assigns, executors, heirs, to release and indemnify and hold harmless The Church of Sutersville, from any cause or action, claims or demands of any nature whatsoever including but not limited to any claims of negligence which I my heirs, representatives, executors, administrators, and assigns may now have or have in the future against The Church on account of personal injury, property damage, death, or accident of any kind arising out of or in any way related to my presence at or participation in any activity, event, or program, including travel to and from The Church and my activity while there. I understand that I am releasing The Church for any and all claims for injuries or damages arising out of The Church's negligence including but not limited to the temporary or permanent injury to my body or property.

It is the clear intent of this release agreement that the participator is releasing The Church from any and all liability for all personal injury or property damage caused by The Church's negligence.

I _____, also understand and give my consent that my child _____ participating in multiple physical activities including but not limited to, playing sports games, running, jumping, catching, kicking, playing on the playground, bon-fires, staying overnight, being transported to and from the church and church related activities in personal vehicles, a 15 passenger van, or bus. Again I release The Church and all those associated with the organization (listed above) from any and all liability related to any personal/physical injury, property damage, or death during these events.

I have read this release and understand its terms.

_____ Participant _____ Date of Birth

_____ Parent/Guardian _____ Phone#

_____ Address

_____ City, St, Zip

_____ Parent/Guardian's Signature _____ Today's Date

Any know allergies or Special Instructions
