Child/Youth General Release, Permission, Indemnification, and Medical Authorization Agreement

I understand Christ Church United Methodist, Inc. is a not-for-profit church that sponsors various programs (hereinafter "Ministry Programs") and that precautions are taken to ensure that the programs and activities with the Ministry Programs in which my child is participating are conducted in a safe and responsible manner. However, I further understand that, because of the nature of activities within the Ministry Programs, in which I am enrolling my child/youth, (name of child)_____

(Herein after referred to as "Participant") regardless of the supervision, there is a potential for injury or death during any activity. I do recognize these risks and agree to allow my child/youth to participate in all activities as indicated below. I represent that my child/youth is physically fit and has the necessary skill and physical ability to safely participate in all activities.

As consideration for the PARTICIPANT being accepted by Christ Church United Methodist, Inc. for participation in the Christ Church Ministry Programs, and specifically participation in

CHRIST CHURCH SCHOOL SUMMER CAMP 2023

Taking place on: JUNE 2023 - JULY 2023

I, do hereby release, indemnify, forever discharge and agree to hold harmless Christ Church United Methodist, Inc. and the Florida United Methodist Annual Conference, their officers, directors, employees, pastors, volunteers, successors and assigns (collectively called "RELEASEES"), From any and all liability, claims, or demands from personal injury, sickness, or death, as well as property damage and expenses of any nature whatsoever, whether legal or administrative, arising out of or in connection with any personal injury, including death, or property damage, resulting in any way from or in any manner arising from PARTICIPANT'S participation in the Christ Church Ministry Programs whether caused in whole or in part by negligent acts or failure to act of Christ Church, its agents, servants, employees, pastors or volunteers.

This release, indemnification agreement, and wavier specifically includes, but is not limited to, any claim which might otherwise be brought on behalf of myself or the PARTICIPANT for (a) negligence or negligent supervision by RELEASEES; (b) any injury or harm, including death, that may occur while PARTICIPANT is participating in Christ Church Ministry Program or Special Event set forth above, including travel to and from, if required, before, during, or after the Ministry Program or Event and (c) any negligent act or failure to act on the part of those chosen to administer emergency medical care to the PARTICIPANT. I acknowledge by my signature below that I have carefully read this release and that I fully understand that this is a waiver of claim and release of liability of the RELEASEES from any and all claims made by me, or on my behalf, or on behalf of PARTICIPANT minor child, regardless of whether those claims are caused by the negligent acts or failure to act by Christ Church, its agents, servants, employees, pastors, or volunteers.

The undersigned further consents to the administration of first aid and/or doctor's care or any form of medical treatment necessitated by illness or injury that may require the same.

I further agree to indemnify RELEASEES for any costs or attorney's fees incurred by the RELEASEES resulting from any claim that I, my spouse, my child(ren), or heirs may make against any third party as a result of participating in the program activity or event set forth above, even if that claim is caused in whole or in part by the negligence of the RELEASEES.

By my signature below, it is my understanding that Christ Church will attempt to notify me in case of a medical emergency involving my child/youth, but if the Church cannot reach me, I consent to the administration of first-aid and/or doctor's care or any form of medical treatment necessitated by illness or injury for the minor PARTICIPANT and I agree that I will pay for any medical expenses incurred.

Christ Church is granted permission to use any individual or group photograph taken of participant at the event for publicity or brochure purposes.

Grades	Ages		
Emergency Contact Name & Phone number:	Relationship:		
Insurance Company:	Policy Number:		
Parent/Legal Guardian Printed Name:			
Home Phone:	Work Phone:	Cell Phone:	
Parent/Legal Guardian Signature:		Date:	
Notary Signature	Date		
Notary Stamp (We will be happy to notarize this f	for you at no charge at the c ^r	hurch office)	