



MINOR'S RELEASE OF CLAIMS AND HOLD HARMLESS AGREEMENT HIGH RISK ACTIVITIES AND OFFSITE ACTIVITIES

ACTIVITY: _____

ACTIVITY DATE(S): _____

I, _____, hereby affirm and agree that I am the parent or legal guardian

of _____, a minor ("Minor"); that I am legally competent to sign this agreement and release; that I have fully informed myself of this Release by reading it before signing; and that I have fully informed myself of the details and risks of the Activity prior to signing this Release.

I agree, individually and on behalf of Minor, to release and to hold harmless Life Christian Church International, Inc., its affiliated organizations, and their agents, officers, directors, and employees (collectively referred to as "the Church") from liability of any kind, for Minor's injury, death, or damage to or loss of Minor's personal property, resulting directly or indirectly from his/her participation in the Activity and/or from the Church's negligence. I personally assume all risks and liabilities in connection with Minor's participation in the Activity and agree to indemnify the Church from any liability assessed against the Church as a direct or indirect result of Minor's participation in the Activity. This release includes all risks and liabilities connected with the Activity, whether foreseen or unforeseen.

In the event that Minor is injured during the Activity, and I am unable to provide consent to his or her medical treatment, I authorize the Church to consent on my behalf to the performance of any and all medical treatment judged necessary by the Church, until I am able to provide consent or until someone legally able to speak on Minor's behalf is made available.

I agree, individually and on behalf of Minor, to release, indemnify, and hold the Church harmless from any liability which may be assessed against the Church as a direct or indirect result of said medical treatment. I agree to pay or arrange for payment for all costs associated with said medical treatment.

INITIALS

PHOTOGRAPH/VIDEO RELEASE

I give Life Christian Church International, Inc permission to use photographs and/or video footage to do the following for non-profit use and without charge: use at the discretion of Life Christian Church International, Inc., display at a service or event or be used in a multimedia presentation, reprint and distribute for any LCC non-profit publication with copyright to accompany photo when used, displayed on the Life Christian Church website, or use quotes and video clips on the Life Christian Church website.

INITIALS

The undersigned agrees to the above Initialed sections and this agreement is binding on my Heirs, Successors and personal representatives.

Signature - Parent or Legal Guardian

Signature – Witness

Print – Parent or Legal Guardian

Print – Witness Name

Date

Date

EMERGENCY CONTACT INFORMATION

1ST Emergency Contact			2ND Emergency Contact		
Telephone	<i>Home</i>	<i>Cell</i>	Telephone	<i>Home</i>	<i>Cell</i>
Relationship to Minor			Relationship to Minor		

MEDICAL INFORMATION

Policy Holder Name	Policy Number
Insurance Company	Group Number
Insurance Company Address	
Prescription Insurance <i>(if difference from above)</i>	
Policy Holder Name	Policy Number
Insurance Company	Group Number
Insurance Company Address	
Allergies	Medications now being taken: