6905 172nd Street NE - Arlington WA 98223 - Phone: (360) 435-9191

Release Form

I give my permission for _____ (name)

… to travel and participate in _____.

I expressly agree and promise to accept and assume all of the risks existing in this activity. Participation in this activity is purely voluntary, and I elect to allow participation in spite of the risks. **I hereby voluntarily release, forever discharge, and agree to defend, indemnify and hold harmless Atonement Free Lutheran Church, River Youth Ministry, the staff, helpers, volunteers, drivers, and chaperons (the "RELEASED PARTIES") from any and all claims, demands, or causes of action, which are in any way connected to the participation in this activity, including any such claims which allege negligent acts or omissions of RELEASED PARTIES.** I certify that I have adequate insurance to cover any injury or damage that I may cause or suffer while participating, or else I agree to bear the costs of such injury or damage myself. I further certify that I am willing to assume the risk of any medical or physical condition that I may have. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect. **I agree that if the participant is a minor, this Release of Liability and Assumption of Risk agreement is made on behalf of that minor participant and that all of the releases, waivers and promises herein are binding on that minor participant. I represent that I have full authority as Parent or Legal Guardian to bind the minor participant to this agreement. I agree that if the participant is a minor, I further agree to defend, indemnify and hold harmless RELEASED PARTIES from any and all claims or suits for personal injury, property damage or otherwise** which are brought by, or on behalf of the minor, and which are in any way connected with such participation by the minor, including injuries or damages caused by the negligence of RELEASED PARTIES, except injuries or damages caused by the sole negligence or willful misconduct of the party seeking indemnity. By signing this document, I acknowledge that if anyone is hurt or property damaged during participation in this activity, I may be found by a court of law to have waived my or the minor participant's right to maintain a lawsuit against RELEASED PARTIES on the basis of any claim from which I have released them herein. I have had sufficient opportunity to read this entire document. I have read and understood it, and I agree to be bound by its terms. Since Atonement Free Lutheran Church believes that disputes involving the church are to be worked out between parties without recourse to the courts (See, generally, Matthew 18 and 1 Corinthians 6), we agree to resolve any disputes through Christian mediation.

In the case of sickness or injury, I authorize the provision of necessary medical services at my expense.

Parent/Guardian signature (or participant if over 18)_____ Date _____

Contact Phone Number: _____

Person to contact other than parent/guardian in the case of an emergency, in the event that parent/guardian is not available:

Name _____ Phone _____

Please note any medical conditions or allergies that might hinder medical treatment: