

## Adult Events and Activities Release and Indemnification Form

### Parties

This Release from Liability ("Release") is made this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by and between Liberty Baptist Church ("Church") and \_\_\_\_\_ ("Releasor").

### Personal Information

Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Spouse \_\_\_\_\_

### Event and Activities

Church will be conducting the following Event, which will include the Activities listed.

Event \_\_\_\_\_

Activities

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Consideration

In consideration of participation in the above-listed event, Releasor does hereby grant this Release of Liability and grant permission for participation.

### Medical Information

Is sponsor authorized to obtain medical treatment?  Yes  No

Is participant covered by personal/family medical insurance?  Yes  No

If yes, name of insurer: \_\_\_\_\_ Policy/Group # \_\_\_\_\_

Allergies \_\_\_\_\_

Surgeries \_\_\_\_\_

Medications \_\_\_\_\_

Do you suffer from

- |                          |                   |                          |                           |
|--------------------------|-------------------|--------------------------|---------------------------|
| <input type="checkbox"/> | Asthma            | <input type="checkbox"/> | Epilepsy/Seizure Disorder |
| <input type="checkbox"/> | Anxiety           | <input type="checkbox"/> | Heart Trouble             |
| <input type="checkbox"/> | Diabetes          | <input type="checkbox"/> | Stomach Issues            |
| <input type="checkbox"/> | Physical Handicap | <input type="checkbox"/> | Other: _____              |

**Emergency Information**

Primary Care Physician \_\_\_\_\_ Phone \_\_\_\_\_

Primary Contact/Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Secondary Contact/Relationship \_\_\_\_\_ Phone \_\_\_\_\_

**Release and Indemnification**

1. Releasor certifies that he/she is physically and emotionally able to participate in the above listed Event and Activities.
2. Releasor certifies that he/she executes this release freely, voluntarily, and after sufficient review.
3. Releasor certifies and he/she has the authority to release Church from any and all claims and has not transferred such authority to any other person.
4. Releasor acknowledges that there are inherent risks involved in certain ministry and athletic events.

**Short-Term Missions Trip.** Releasor acknowledges that there are inherent risks involved in a short-term missions trip—whether overseas or stateside. Releasor represents that he/she has received all appropriate medical prevention required for the short-term missions trip, and is physically, emotionally, relationally, and spiritually able to participate in the trip.

\_\_\_\_\_ Releasor's Initials

5. Releasor authorizes the agents of Liberty Baptist Church to make emergency medical decisions on behalf of him/her in the event he/she is unable to make such decisions. Releasor acknowledges that he/she will ultimately be responsible for the cost of any medical care provided to Releasor.
6. Releasor agrees to release and indemnify the Church, its pastors, trustees, officers, directors, employees, agents, and volunteer workers from any and all liability for injury, loss, or damage to person or property that may occur during the course of his/her involvement in the Event.
7. This Release does not extend to claims of intentional acts, gross negligence, or willful or wanton conduct arising from Releasor's participation in above listed Event and Activities. Releasor agrees to attempt to settle all such claims through good faith negotiation with Church. If good faith negotiation fails, Releasor agrees to attempt to settle all such claims through mediation with a professional mediator. If mediation fails, Releasor agrees to that the laws of the Commonwealth of Virginia shall govern and the jurisdictional forum shall be the Commonwealth of Virginia.

**Signatures**

\_\_\_\_\_  
Releasor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Releasor

\_\_\_\_\_  
Authorized Church Representative

\_\_\_\_\_  
Date