

LIABILITY RELEASE FORM  
Release of All Claims

I) being 21 years of age or older, do for ourselves (myself) and for an on behalf of my child/participant if said child is not 21 years of age or older, do hereby release, forever discharge and agree to hold harmless The Presbytery of Chicago from any and all liability, claims of and expenses of any nature whatsoever, which may be incurred by the undersigned and the child/participant that occur while said child is participating in the above described trip or activity.

Furthermore, we (I) and behalf of our (my) child/participant if under the age of 21 years, hereby assume all risk of personal injury, sickness, death, damage, and expense as a result of participation in recreation and work activities involved therein.

The undersigned further hereby agrees to hold harmless and indemnify said church, its directors, employees, and agents for any liability sustained by said church as the result of negligent, willful or intentional acts of said participants, including expenses incurred attendant thereto.

If the participant has not attained the age of 21 years, we (I) are the parent(s) or legal guardian(s) of this participant, and hereby grant our (my) permission for him (her) to participate fully in said trip, hereby give our (my) permission to take said participant to a doctor or hospital, and hereby authorize medical treatment, including but not in limitation to emergency surgery or medical treatment, and assume the responsibility of all medical bills, if any.

Further, should it be necessary for the participant to return home due to medical reasons, we (I) hereby assume all transportation costs.

\_\_\_\_\_  
(type or print name of participant)

\_\_\_\_\_  
(parent(s) telephone)

\_\_\_\_\_  
(pastor's telephone)

\_\_\_\_\_  
Insurance company name

\_\_\_\_\_  
Policy number

\_\_\_\_\_  
(physician's telephone)

\_\_\_\_\_  
(emergency phone number)

(Only participant need sign if 21 years of age or older.  
If under 21, **both** parents must sign, unless parents are separated or divorced, in which case the custodial parents must sign.)

\_\_\_\_\_  
father date

\_\_\_\_\_  
mother date

\_\_\_\_\_  
legal guardian date

\_\_\_\_\_  
participant, if age 21 date

**Participant Only**

**I have read the foregoing and understand the rules of conduct for participants and will abide by them as well as the directions of leadership.**

\_\_\_\_\_  
Participant

**PLEASE PHOTOCOPY BOTH SIDES OF YOUR INSURANCE CARD**