

First Baptist Church, Cleburne, Texas Participant Form – 2018-2019

Participant Information (Youth or Adult) *(To be completed by participant or authorized parent/guardian)*

Name of Student/Adult Participant: _____ Student's Grade for 2018-2019: _____

Name of parent/guardian (for children age 18 and younger): _____

Parent/Adult Participant Cell Phone: _____ Participant's Date of Birth: _____

Participant's Email: _____ Parent/Guardian Email: _____

Address: _____ City/State/Zip: _____

Emergency Contact (include cell phone & relationship to participant): _____

List allergies, medical conditions, or medications *(use back of form, if needed)*: _____

Is sponsor authorized to approve medical treatment? Yes No

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

If yes, name of insurer: _____

Policy or group number: _____

Permission, Acknowledgements, Release, Indemnity

I understand that as a Participant, I or my child may be photographed or videotaped during normal activities of First Baptist Church, Cleburne, TX ("FBCC"), and these photos/videos may be made public on any platform or publication as deemed appropriate by FBCC.

In consideration for the opportunity to participate in activities of FBCC, the Participant (or parent/guardian) acknowledges and accepts the risks of injury associated with participation in and transportation to and from any and all activities of FBCC. The Participant (or parent/guardian) accepts personal financial responsibility for any injury or other loss sustained during these activities or during transportation to and from the activity, as well as for any medical treatment rendered to the Participant (or parent/guardian) that is authorized by the Sponsor or its agents, employees, volunteers, or any other representatives (collectively referred to hereinafter as the "Activity Sponsor"). Further, the Participant (or parent/guardian) releases and promises to indemnify, defend, and hold harmless the Activity Sponsor for any injury arising directly or indirectly out of the described Activity or transportation to and from the Activity, whether such injury arises out of the negligence of the Activity Sponsor, the Participant (or parent/guardian), or otherwise.

I acknowledge that participation in the activities/events ("activities") of FBCC involves risk to the Participant (and to Participant's parents or guardians, if Participant is a minor), and may result in various types of injury including, but not limited to, the following: sickness, bodily injury, death, emotional injury, personal injury, property damage and financial damage. I, the undersigned, do hereby verify that the above information is correct, and I do hereby release and forever discharge FBCC, church volunteers and staff ("Released Parties") from any all claims, costs, demands, actions or causes of action, past, present or future arising out of any damage or injury in connection with my or my child's participation in the activities of FBCC. I agree to indemnify the Released Parties for any and all claims, demands, damages, injuries, costs, suits or causes of action past, present, or future, arising out of or caused by myself or by my child while participating in activities or while on property leased or owned by any of the Released Parties.

Authorization and permission is given to FBCC and its Activity Sponsors to furnish any necessary transportation, food, and lodging for the Participant (or parent/guardian). If the Participant is a minor, the parents/guardians give permission for the Participant to participate fully in any and all activities of FBCC. Should it be necessary for the Participant to return home due to medical reasons, disciplinary action, or otherwise, the parent/guardian assumes all transportation costs.

I represent and acknowledge that I have completely read and understand this document and all its terms and all matters referred to herein, that I sign voluntarily as my free act and deed, that I have had ample opportunity to obtain the advice of counsel and that, by signing this document, I understand that I am relinquishing legal rights and remedies that may have otherwise been available to me. I understand that this Waiver and Release shall be construed as broadly and inclusively as is permitted by applicable law and agree that if any portion of this document is held invalid, the remaining shall continue in full force and effect. To the extent the restriction on filing lawsuits is deemed unlawful, I agree to submit any Claims to a Christian conciliation/mediation organization for binding resolution.

Signature: _____ Date: _____

Signature: _____ Date: _____

Signature: _____ Date: _____

(Participant and/or parent/guardians' signature if participant is a minor)