



Calvary Church

Informed Consent and Release of Liability and Indemnity

All Church Ministry Activities — ADULT PARTICIPANT, AGES 18+

NAME OF PARTICIPANT

First Name

Middle Name

Last Name

In exchange for Calvary Church ("Calvary") allowing me to participate in ministry activities, whether self-guided, staff led or volunteer led, and including group activities, social events, and trips (the "Church Activities"), I agree not to hold Calvary, its officers, employees, volunteers, or other agents responsible or liable for any loss, injury, illness, virus, disease, disability, or death that I might suffer while participating in Church Activities. I certify that I am in good physical condition, fit to participate in Church Activities and do not suffer from any physical impairment that might be aggravated by participating. I understand that I am personally responsible for the cost of all medical care related to any accident, injury, illness, disease, virus, or disability arising from my participation in Church Activities, whether or not such costs are covered by medical/health insurance.

I understand and acknowledge that participation in Church Activities is completely voluntary and that participation may expose me to many possible risks such as travel delay, accidents, negligence, disease, war, terrorism, criminal acts, political unrest, injury from construction projects, and other calamities that could cause loss of property, illnesses, personal injury, disability or death. **I ASSUME ALL RISKS, KNOWN AND UNKNOWN, ASSOCIATED WITH CHURCH ACTIVITIES AND RELATED TRAVEL OR EVENTS THAT COULD RESULT IN LOSS, INJURY, ILLNESS, VIRUS, DISEASE, DISABILITY, OR DEATH.**

I HEREBY RELEASE AND DISCHARGE CALVARY FROM ALL CLAIMS AND LIABILITY that may arise from any loss, injury, illness, virus, disease, disability, or death to me occurring during or as a result of participation in Church Activities and related travel or events, even if caused in whole or in part by my not completing a current Medical Information Form, or by an act or omission, including without limitation negligence or carelessness, of Calvary, its officers, employees, volunteers, or other agents.

I AGREE TO INDEMNIFY AND HOLD CALVARY, ITS OFFICERS, EMPLOYEES, VOLUNTEERS OR OTHER AGENTS HARMLESS FROM ALL CLAIMS AND LIABILITY arising from any loss, injury, illness, virus, disease, disability, or death to me occurring during or as a result of participation in Church Activities and related travel or events, even if caused in whole or in part by an act or omission, including without limitation negligence or carelessness, of Calvary, its officers, employees, volunteers, or other agents.

I FURTHER AGREE TO INDEMNIFY AND HOLD CALVARY, ITS OFFICERS, EMPLOYEES, VOLUNTEERS OR OTHER AGENTS HARMLESS FROM ALL CLAIMS AND LIABILITY ARISING FROM ANY LOSS, INJURY, ILLNESS, VIRUS, DISEASE, DISABILITY, OR DEATH ANY PERSON MAY SUSTAIN that is caused in whole or in part by my acts or omissions, including without limitation negligence or carelessness, while I am participating in Church Activities and related travel or events.

I HAVE CAREFULLY READ THE FOREGOING AND I UNDERSTAND THAT MY SIGNATURE MAKES EFFECTIVE A RELEASE AND INDEMNITY THAT HOLDS CALVARY, ITS OFFICERS, EMPLOYEES, VOLUNTEERS AND OTHER AGENTS HARMLESS FROM ANY LIABILITY FOR INJURY, ILLNESS, VIRUS, DISEASE, DAMAGE, LOSS, ACCIDENT, DELAY, OR IRREGULARITY IN SCHEDULE.

SIGNATURE OF PARTICIPANT

DATE

ADDRESS

CITY

STATE

ZIP

EMAIL

PHONE