

MISSION HILLS CHURCH
SHORT-TERM MISSION TRIP
MINOR LIABILITY RELEASE
2019

MINOR PARTICIPANT'S PARENT / LEGAL GUARDIAN MUST READ AND COMPLETE THIS FORM. **IT MUST BE NOTARIZED!** IN THE EVENT OF AN EMERGENCY, THIS FORM WILL BE ESSENTIAL FOR PARENTAL CONTACT AND APPROPRIATE CARE.

I acknowledge that my child's participation in the Mission Hills Church Short-Term Mission Trip program is voluntary and may require involvement in activities that require traveling or physical exertion. Such activities may include, but are not limited to, camps, athletic games, excursions, mission trips and meetings. I acknowledge that my child's participation in any Mission Hills Church activity presents risks that my child may suffer property damage, bodily injury, or death. Therefore, in consideration of my child's participation in the Mission Hills Church program activities, I agree to the following:

INITIAL: **MEDICAL RELEASE:** I hereby authorize the treatment for the named minor child by a qualified or licensed medical provider in the event of a medical emergency, which in the opinion of the attending physician, may endanger his/her life, cause disfigurement, physical impairment, or undue discomfort if delayed, while said child is participating in a church program, including transportation to and from that program. This authority is granted for the child only after a reasonable attempt has been made to contact me.

INITIAL: **PHOTOGRAPHY RELEASE:** I consent to have photographs taken of the named minor child during the Mission Hills trips and activities. The pictures may be used on the Mission Hills Web Page, in future brochures, or in slide shows during and/or after the event without compensation or notification.

INITIAL: **TRANSPORTATION RELEASE:** I also give my permission for my child to be transported to and from the trip destination (local, national and international) in a church, rental or private vehicle.

INITIAL: **PERSONAL BELONGINGS RELEASE:** I realize that Mission Hills is not responsible for my, or my child's personal belongings.

INITIAL: **DISCIPLINE RELEASE:** If in the event of repeated student misconduct, I authorize the staff to send my student home at my (parent's/guardian's) expense.

INITIAL: **GENERAL RELEASE:** The undersigned, or a member of the immediate family of the undersigned, desires to participate in the trip operated or sponsored by Missions Hills Church (hereinafter referred to as the "church"). The undersigned or a member of the immediate family of the undersigned acknowledges that the undersigned or member of the immediate family of the undersigned may incur personal injury or bodily damage while participating in this trip and acknowledge that the church, its officers, its directors, its employees, its agents, and any parties volunteering on behalf of the church, shall be held harmless from all actions, claims, costs, expenses, or damages of any kind, arising out of, or related to any activity of the church in which the undersigned or a member of the family of the undersigned participates. The undersigned or a member of the family of the undersigned, further acknowledges that this is a full and complete release for all injuries and damages that the undersigned or a member of the immediate family of the undersigned may sustain as a result of the undersigned or a member of the immediate family of the undersigned participating in any Church activity.

PRINT PARTICIPANT'S NAME:

PRINT PARTICIPANT'S PARENT/
LEGAL GUARDIAN NAME:

PARTICIPANT'S PARENT/
LEGAL GUARDIAN SIGNATURE:

DATE:

NOTARIZED BY:
STATE: COUNTY:
SIGNATURE:
DATE: