



Student
Embracing Louisville
Parental Consent/Liability Release Form
Kentucky WMU and LRBA
July 20-25, 2019

**All participants under the age of 19 must have a signed
Parental Consent/Liability Release Form**

Consent: I/We, the undersigned parent(s) or duly appointed guardian(s) of _____ ('Minor') give permission for said Minor to participate in the Kentucky WMU Embracing Louisville event (the 'Event'). I/We understand that during the course of this event the Minor will participate in various activities.

Supervision/Responsibility: The Minor will be attending the Event under the supervision of _____ (list the leader[s] of the group with which the Minor is attending) (the 'Chaperone'). I/We understand that the Chaperone will be responsible for the Minor's safety and supervision at all times, included but not limited to travel to and from the Event, during Event activities, and free time. In the event medical treatment becomes necessary, it shall be the Chaperone's responsibility to determine whether professional medical assistance should be sought, obtain and give consent to appropriate medical care, transport persons in need of medical care, and contact the Minor's parents or guardians. If the Chaperone is not present and medical care is necessary, I/We hereby grant Kentucky WMU to seek medical treatment for the Minor and have executed Kentucky WMU Medical Authorization and Release permitting Kentucky WMU to take such action.

Assumption of Risk: I/We are aware of the risks associated with participation in the Event and do hereby voluntarily assume full responsibility for any risk of loss, damage, personal injury or sickness, including death, that may result from the Minor's participation in Event activities.

Release/Indemnification: I/We hereby, in consideration of the personal benefits accruing to me/us and the Minor through participation in the Event and other good and valuable consideration received, consent to the participation of the Minor in the Event and release absolutely, forever discharge and hold harmless Kentucky WMU, its successors, affiliates, officers, directors, employees, volunteers and/or agents and any organization or person(s) working for or with Kentucky WMU or sponsoring an event/program for Kentucky WMU (collectively 'Releasees') from any and all present or future liability, claims, demands or actions, whether asserted by me or a third party, arising out of the Minor's travel to and from and participation in the Event, including, but not limited to the injury, sickness or death of Minor ('Claims'). Additionally, I/We agree the I/We, my/our heirs, successors and assigns and the Minor will not make any claim or institute any lawsuit against Kentucky WMU and/or the Releasees for any and all liability for losses, injuries, damages, sickness, and/or death that may result from the minor's participation in the missions program of Kentucky WMU. Further, I/We agree to indemnify the Releasees for any such Claims for liability and/or damages associated therewith, including, but not limited to, reasonable attorneys fees, court costs, and other legal expenses.

Understanding: I/We represent and acknowledge that I/We have completely read and understand this document, that I/We have had ample opportunity to obtain the advice of counsel, and that by signing this document understand the I/We are relinquishing legal rights and remedies that may have

otherwise been available to me/us. I/We 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 Release/Indemnification provision is deemed unlawful, I/We agree to submit any claims I/We may have to have a Christian conciliation/mediation organization for binding resolution.**

Medical Consent: I/We give my/our consent and permission for the taking of photography and/or video of the above-named Minor during the described event and waive and/or assign any and all rights (including copyright) in such media to Kentucky WMU. Kentucky WMU, as the sole owner of such media shall have the exclusive right to control and determine the use, display, performance, production, and dissemination of any such photography and/or video.

Media Consent. I/We give my consent and permission for taking of photographs and/or video of my/our child during the event and waive and/or assign any and all rights (including copyright) in such media to Kentucky WMU. Kentucky WMU, as sole owner of such media, shall have exclusive rights to control and determine the use, display, performance, reproduction and dissemination of any such photography and/or videos.

Contact Information Consent: I/We give our consent to share contact information of the above-named Minor with other participants in the described event.

CAUTION: READ THIS DOCUMENT CAREFULLY BEFORE SIGNING. THIS IS A GENERAL RELEASE AND INDEMNIFICATION OF CLAIMS BY THE MINOR'S PARENTS/GUARDIANS AND ON BEHALF OF THE MINOR.

Minor's Name _____

Parent/Guardian Signature _____

Relationship to Minor _____

Parent/Guardian Signature _____

Relationship to Minor _____

Date _____

IF MORE THAN ONE PARENT HAS CUSTODY OF MINOR, EACH PARENT MUST SIGN FORM.