

**WOODS MEMORIAL PRESBYTERIAN CHURCH  
YOUTH MINISTRY**

**PARENT'S/GUARDIAN'S RELEASE OF LIABILITY AND INDEMNIFICATION  
(FOR PARTICIPANTS UNDER 18 YEARS OF AGE)**

In consideration of Woods Memorial Presbyterian Church ("Woods") permitting my child to participate in Youth Groups **Ice Skating Trip to the Naval Academy March 8<sup>th</sup> 2009**. I hereby voluntarily release and forever discharge Woods, its officers, employees, and agents from any and all liability or claims for any property damage, injury, illness, or death my child may sustain arising out of or in any way connected with his or her participation in this event, to the extent not covered by applicable insurance. This release encompasses all aspects of the event, including preliminary and subsequent matters such as, but not limited to, training for the event, travel to and from the event location, group recreational activities, meal preparation and cleanup, group learning activities, and living together as a group. To minimize such risks, I have instructed my child to obey all rules, regulations, and instructions issued by the adult leaders during the event.

I also agree to hold harmless and indemnify Woods, its officers, employees and agents for any and all liability or claims sustained as the result of my child's negligence or willful or intentional acts, including any associated expenses incurred.

In the event it should be necessary for my child to return home due to medical reasons, disciplinary actions or otherwise, I agree to assume all transportation costs.

To assist the adult leaders in the event of an emergency, the following information is provided:

Participant's Name \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Emergency Contact's Telephone: \_\_\_\_\_

Medical Insurance: Yes \_\_\_ No \_\_\_ Insurance Company Name: \_\_\_\_\_

Policy Number: \_\_\_\_\_

Physician: \_\_\_\_\_

Physician's Telephone: \_\_\_\_\_

Participant's Address: \_\_\_\_\_

Participant's Date of Birth: \_\_\_\_\_

Participant's Social Security Number: \_\_\_\_\_

**BY SIGNING THIS DOCUMENT I FULLY RECOGNIZE THAT IF PROPERTY DAMAGE, INJURY, ILLNESS, OR DEATH OCCURS TO MY CHILD WHILE ENGAGED IN THIS EVENT, I WILL HAVE NO RIGHT TO MAKE A CLAIM OR FILE A LAWSUIT AGAINST WOODS, ITS OFFICERS, EMPLOYEES, OR AGENTS, TO THE EXTENT NOT COVERED BY APPLICABLE INSURANCE.**

**I HAVE CAREFULLY READ THIS RELEASE OF LIABILITY AND INDEMNIFICATION FORM AND FULLY UNDERSTAND ITS CONTENTS. I AM SIGNING THE FORM OF MY OWN FREE WILL. I FURTHER UNDERSTAND THAT IF, AFTER READING THIS RELEASE AND INDEMNIFICATION FORM , I CHOOSE NOT TO ALLOW MY CHILD TO PARTICIPATE IN THE EVENT, A FULL REFUND OF ANY MONEY ALREADY PAID WILL BE MADE.**

Note: If the participant has two living parents or guardians, both must sign this release.

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Parent /Guardian #1 Signature

Date

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Parent /Guardian #2 Signature

Date