WAIVER, RELEASE OF LIABILITY, AND CONSENT FOR MEDICAL ATTENTION $% \left(1\right) =\left(1\right) \left(1\right) \left($

Orange Park United Methodist Church

	Orange Park, FL 32073 / Pho	
In exchange for my being allowed to participate	ate in the activity	(event) sponsored by
Orange Park United Methodist Church (herei	n referred to as "OPUMC"), I $_{\perp}$	(Student's
Name) and my parent or legal guardian (indiv	vidually and collectively referre	ed to below in the first person
singular) agree to be bound by each of the fol	llowing:	
1. Obligation to Inspect Facilities and Equipm	ent: I agree that prior to partici	ipating in the event, I will inspect
the facilities and equipment to be used. If I be	elieve anything is unsafe, I will	immediately advise the supervisor
of the event and OPUMC of such unsafe cond	dition(s) and refuse to participa	ite in the event.
2. <u>Identification of Risks:</u> I understand the pa	rticipation in the event may inv	volve risk of serious injury,
including permanent disability and death, and	l other losses, both to persons a	and property. I understand that these
injuries and losses might result from the action	ons, inactions, negligence, or co	onduct of others, the rules of the
event, or the condition of the premises or of a	ny equipment used.	
3. Assumption of Risk: I assume all risks, known	own and unknown, in any way	connected with my participation in
the event. I accept personal responsibility for	any liability, injury, loss or dan	mage in any way connected with my
participation in the event.		
4. Waiver and Release: I waive, release, and I	hold harmless OPUMC and its	directors, officers, sponsors,
employees, volunteers, agents, successors, an	d assigns from all claims for ar	ny liability, injury, loss or damage in
any way connected with my participation in t	he event, whether or not caus	ed in whole or part by the
negligence or other misconduct of OPUMO	C or any of the persons mention	oned above. I intend for this waiver
and release also to apply to any relatives, pers	sonal representatives, heirs, ber	neficiaries, and next of kin or
assigns who might pursue any legal action or	claim for such liability, injury,	, loss or damage. Furthermore, in
consideration of my child's participation in th	e event set forth above, I hereb	y AGREE TO INDEMNIFY AND
HOLD HARMLESS OPUMC from any and a	all claims, demands, rights of a	ctions or liabilities of whatsoever
nature that any person had, now has, may have	ve or might in the future have a	gainst OPUMC, including but not
limited to, any and all claims, demands, right	s of actions or liabilities based	upon any NEGLIGENCE on the
part of OPUMC based upon, arising out of, o	r in any manner connected with	n my child's participation in the
event identified above.		
5. Consent to Medical Treatment: I agree that	t OPUMC may provide to me, t	through medical personnel of its
choice, customary medical or training assistance, transportation, and emergency medical services. This consent		
does not impose a duty upon OPUMC to prov	vide such assistance, transporta	tion, or services.
6. Media Consent: I understand that pictures	of the event, which may include	e my child, will be available for use
in church publications.		
7. Consent to Communication: I agree and give p	ermission for OPUMC staff, person	onnel and leaders to contact my student
electronically and by phone.		
THAVE DEAD THE WARRED DELEASE	AND CONCENT LUNDED	
I HAVE READ THIS WAIVER, RELEASE, AND CONSENT. I UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT. I AM SIGNING THIS WAIVER, RELEASE, AND CONSENT		
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VOLUNTARILY.		
Child Print Name:	Signed.	Date:
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Parent/Guardian Print Name: _____Signed: _____

Date:____