

WAIVER AND RELEASE OF LIABILITY

Name: _____

Date: _____

Provider: St. Luke United Methodist Church

Services: Vacation Bible School

I, ON BEHALF OF MYSELF AND MY CHILD/CHILDREN, HEREBY ASSUME ALL OF THE RISKS OF REQUESTING THIS SERVICE, including by way of example and not limitation, any risks that may arise from contracting COVID-19 from St. Luke United Methodist Church (hereinafter called "ST. LUKE UMC") and from any negligence or carelessness on the part of ST. LUKE UMC and I hereby release and discharge ST. LUKE UMC from any and all liability for and from any medical condition, including viral infection which may arise from my child's participation in the Vacation Bible School program provided by ST. LUKE UMC.. This Waiver and Release of Liability covers any negligence or carelessness in relation to exposing me or my child/children to the COVID-19 virus from ST. LUKE UMC while providing such services.

I understand that there are risks of viral infections that cannot be avoided, even by compliance with recommendations of governmental authorities. I also understand that social distancing may not be possible or practical in dealing with children in the ministry setting. I also understand that there will be other children and adults coming into contact with my child/children and that viral infections, including COVID-19, may be transmitted by such contact.

I understand that I am responsible for determining whether I and my child/children are physically and medically able to allow my child/children to participate in the ST. LUKE UMC Vacation Bible School program. I am responsible for determining whether a physical or medical examination should be undertaken before I or my dependents participate in the services being provided by ST. LUKE UMC and I will abide by any determination, limitation, or recommendation that may be issued by my medical or health care provider. Before, during, and after the services, I am solely responsible for determining my and my children's health and physical status and whether I or my children can or should discontinue my participation in the services, or take other actions, to protect my own, and my children's, health or safety. ST. LUKE UMC assumes no duty to me or my children to ensure medical ability to participate in the ST. LUKE UMC program, whether before, during, or after the said program.

I acknowledge that this Waiver and Release of Liability Form will govern my actions and responsibilities at said programs, services, activity or event.

In consideration of providing services to me and/or my dependents, I hereby take action for myself, dependents, my executors, administrators, heirs, next of kin, successors, and assigns as follows:

(A) I WAIVE, RELEASE, AND DISCHARGE from any and all liability, including but not limited to, liability arising from the negligence or fault of the entities or persons released, for my death, illness, disability, personal injury, property damage, property theft, or actions of any kind which may hereafter occur to me including my traveling to and from this event, THE FOLLOWING ENTITIES OR PERSONS: ST. LUKE UMC and its trustees, officers, employees, program staff, pastors, administrative staff, representatives and agents;

(B) I INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE the entities or persons mentioned in this paragraph from any and all liabilities or claims made as a result of participation in this service, activity or event, whether caused by the negligence of said persons or otherwise. My and my child/children's participation in the services and programs of ST. LUKE UMC is voluntary.

I acknowledge that neither ST. LUKE UMC nor its trustees, officers, employees, representatives, and agents shall be responsible for the contamination, errors, omissions, acts, or failures to act of any party or entity conducting in providing the services.

The accident waiver and release of liability shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

I CERTIFY THAT I HAVE READ THIS DOCUMENT, AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND I SIGN IT OF MY OWN FREE WILL.

ON BEHALF OF MYSELF AND MY DEPENDENTS

Print Name: _____

Date: _____

Electronic Signature: _____

List Children or write "Self": _____