



NORTH**METRO**CHURCH

ACTIVITY PARTICIPATION AGREEMENT

Activity Information (to be completed by the activity sponsor)

Name of sponsoring organization: **North Metro Church**

Address: **12505 Colorado Blvd, Thornton, CO 80241**

Phone: **303-457-8560**

Name of sponsor's coordinator: _____ Phone: _____

Description of activity: _____

Date(s) and location of activity: _____

Participant Information (to be completed by participant or authorized guardian)

Name of participant: _____

Name of parent/guardian (if participant is a minor): _____

Address: _____ Phone: _____

Name of emergency contact: _____ Relationship: _____

Phone (daytime): _____ Phone (evening): _____

Secondary emergency contact: _____ Relationship: _____

Phone (daytime): _____ Phone (evening): _____

List allergies or medical conditions: _____

Is sponsor authorized to approve medical treatment? Yes No

Is participant covered by personal/family medical insurance? Yes No

If yes, name of insurer: _____

Policy or group number: _____

Participation Agreement

I acknowledge that participation in the activity described above involves risk to the participant (and to the participant's parents or guardians, if the participant is a minor), and may result in various types of injury including, but not limited to, the following: sickness, exposure to infectious/communicable disease, bodily injury, death, emotional injury, personal injury, property damage, and financial damage.

In consideration for the opportunity to participate in the activity described above (the "activity"), the participant (or parent/guardian if the participant is a minor) acknowledges and accepts the risks of injury associated with participation in and transportation to and from the activity. The participant (or parent/guardian) accepts personal financial responsibility for any injury or other loss sustained during the activity or during transportation to and from the activity, as well as for

any medical treatment rendered to the participant that is authorized by the sponsor or its agents, employees, volunteers, or any other representatives (collectively referred to as the “activity sponsor”). Further, the participant (or parent/guardian) releases and promises to indemnify, defend, and hold harmless the activity sponsor for any injury arising directly or indirectly out of the described activity or transportation to and from the activity, whether such injury arises out of the negligence of the activity sponsor, the participant, or otherwise.

Emergency Authorization

I hereby give permission to medical personnel selected by the activity sponsor or the sponsor’s designee (referred to as the “authorized agent”) to order X-rays, routine tests, and treatment for the activity participant (either myself or my minor child). In the event of an emergency and neither the primary nor secondary contact can be reached, I hereby give permission to the physician selected by the authorized agent to hospitalize, secure proper treatment, order injections and/or anesthesia and/or surgery on behalf of the participant.

I understand that if the participant does not have medical insurance, I, as either the participant or the parent/guardian, will be responsible for any medical expenses in the event of a sickness and/or injury.

Photo/Video Permission

Further, participant (or parent/guardian if the participant is a minor) grants consent for the activity sponsor to use photo or video images taken of the participant in church brochures, advertisements for the church, on the website, in social media, and in other church publications as they see fit. The participant (or parent/guardian) agrees to hold harmless the activity sponsor from any liability which may result from the use of said image(s). **None of the images will be for personal use, and the participant’s name will not be added to any images.**

Dispute Resolution

If a dispute over this agreement or any claim for damages arises, the participant (or parent/guardian) agrees to resolve the matter through a mutually acceptable alternative dispute resolution process. If the participant (or parent/guardian) and the activity sponsor cannot agree upon such a process, the dispute will be submitted to a three-member arbitration panel for resolution in accordance with the rules of the American Arbitration Association.

Signature is required from either the participant or the parent/guardian of the participant.

Signature: _____ Date: _____