CONSENT AND RELEASE FORM FOR CHURCH ACTIVITY

I, the undersigned parent(s) or guardian(s), hereby consent Of my child, _____, who is _____ years of age, participating in the activities connected with the The Rock Group Youth Community trip to and from and at _____, an activity sponsored by **The Rock Church** on the following date(s): _____. I understand that my child will leave the church at _____ and return at _____, and that the transportation used will consist of Church Bus. I understand that this activity will include the following: _____. I certify that my child is able to participate in any and all of these activities. If my child has medical conditions which may be relevant to a physician in the event of an emergency, I have listed them below. In the event that an emergency occurs, I may be reached at the telephone number listed below. If I cannot be reached within a reasonable period of time, as determined by church officials. I hereby authorize the church or the adult sponsor, Johannes Escudero or TRGYC Staff Member, to make emergency medical decisions for my child. If there are any activities that I do not want my child to be involved in, I have listed them below.

I UNDERSTAND AND HEREBY AGREE TO ASSUME ALL OF THE RISKS WHICH MAY BE ENCOUNTERED ON SAID ACTIVITIES, INCLUDING ACTIVITIES PRELIMINARY AND SUBSEQUENT THERETO. I do, for myself and for my child, heirs and assigns, hereby irrevocably and unconditionally release, acquit and forever discharge **The Rock Church** and its agents, employees, and volunteers from any and all liability, actions, causes of actions, claims, expenses, obligations and damages of any nature whatsoever, which I now have or which may arise in the future, in connection with my child's participation in the described activity or in any other associated activities including, but not limit to, any injury my child or property, even injury resulting in death.

I expressly agree that this release, waiver, and indemnity agreement is intended to be broad and inclusive as permitted by the law of the State of California and that if any portion hereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. This release contains the entire agreement between the parties hereto.

I further state that I HAVE CAREFULLY READ AND UNDERSTAND THE FOREGOING RELEASE AND KNOW THE CONTENTS HEREOF AND I SIGN THIS RELEASE AS MY OWN FREE ACT. I understand that this is a legal binding agreement.

Medical conditions to be aware of: _____

Physical restriction: _____

Instructions and medications: _____

Date of last tetanus or booster: _____

I do not wish my child to participate in the following: _____

_____

_____ _____

Parent or Guardian Date Parent or Guardian Date

Telephone number where I may be reached in an emergency: _____