



## PARTICIPANT AGREEMENT, WAIVER AND RELEASE FORM

THIS FORM MUST BE COMPLETED BEFORE ANY PARTICIPATION WILL BE ALLOWED

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

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

Gender (circle one) M F Age: \_\_\_\_\_ Email: \_\_\_\_\_

Best Contact Phone for participant (if applicable): \_\_\_\_\_

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

Relationship to Participant: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

### LIABILITY WAIVER

I certify that I am volunteering to participate in (activity name /description): BROOMBALL on Friday, January 3, 2025. I further certify that I am in good health and have no physical or other impediment which would endanger me while participating in this activity. I will not be under the influence of drugs or alcohol, which would impair my ability. I acknowledge and agree this activity has inherent risks. I have full knowledge of the nature and extent of all the risks associated with this activity.

In consideration of my participation in this activity, I agree (on behalf of myself, my heirs, executors, administrators, and assigns) to release, discharge, waive and relinquish Stonepoint Church (or its officers, agents, employees and volunteers) from any and all liabilities, claims, or actions for personal injury, illness, property damage, or wrongful death which may arise out of my participation.

In addition to this, I agree to act respectfully towards other students, leaders, volunteers, and adults on the trip. I hereby acknowledge that foolish choices and disrespectful actions towards others will result in a verbal warning and if continued, will result in just cause to send participant home at his/her expense.

I HAVE CAREFULLY READ THIS AGREEMENT, WAIVER AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND STONEPOINT CHURCH AND I WILLINGLY SIGN IT OF MY OWN FREE WILL.

Participant Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

*(Parental or Guardian consent on the back)*



## PARTICIPANT AGREEMENT, WAIVER AND RELEASE FORM

### CONSENT OF PARENT/GUARDIAN

*(To be completed and signed by parent/guardian for participants under 18 years of age.)*

I certify that I am the parent or legal guardian of the above participant and that I am entitled to his or her custody and control and I do hereby give permission for my child to participate in the above activity. I further certify that my child is in good health and has no physical or other impediment which would endanger him or her while participating in this activity. I realize that by participating in this activity, my child will be exposed to a risk of illness, injury, or death. I understand the dangers incidental to participating in the activity and the need for safety precautions, and I have discussed the dangers of the activity and the need for safety precautions with my child. I hereby execute the above Agreement Waiver & Release on his/her behalf.

Parent/Guardian Signature: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Relationship: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_