



Western Michigan and Northern Indiana Division

PERMISSION/WAIVER FORM | Young Adult and Teen Time 2016 - 2017

Name of Participant (please print) _____

Parent(s) and/or legal guardian(s) of participant _____

Address _____
Street City State Zip

Home Phone (_____) _____ Work Phone (_____) _____

Age of Child _____ Birth Date _____ Academic Grade _____

Functions and Activities

It is my understanding that participating in the programs and recreational and other activities of The Salvation Army is a privilege. Prior to my participation in such activities, I acknowledge that there are certain risks associated with the activities, including, by way of example, physical injury due to activity-related accidents, physical injury due to transportation-related accidents, illness, or even death. In addition, I acknowledge that there may be other risks inherent in these activities of which I may not be presently aware.

Release of Liability

By signing this Permission/Waiver Form, I expressly warrant that the participant named above is capable of withstanding both the physical and mental demands of the activities discussed below. I also expressly assume all risks of the person participating in the activities, whether such risks are known or unknown to me at this time. I further release The Salvation Army and its staff, volunteer, and agents from any claim that the participant may have against them as a result of injury or illness incurred during the course of participation in the activities. This release of liability shall include (without limitation) any claims of negligence or breach of warranty. This release of liability is also intended to cover all claims that members of the participant's family, representatives, or assigns may have against The Salvation Army or its staff, volunteers, or agents.

I further agree to indemnify and hold harmless The Salvation Army and its staff, volunteers, or agents from any and all claims arising from the participant's participation in its activities and programs, or as a result of injury or illness of my child during such activities.

Special Events and Field Trips

I understand that the individual named above will have the opportunity to participate in special events such as but not limited to **Youth Councils, Lock-Ins, Service Projects, Winter Jam, general outings and events held off premises.** I understand that during this period my teenager/young adult may take part in activities consistent with the purposes of the program.

Parent/Guardian Initials

Young Person's Agreement for Salvation Army Activities

I agree to participate in the functions and activities of The Salvation Army, to cooperate with the leaders and other young people, and to conduct myself as a Christian. I promise to respect God, respect myself, respect other persons, and respect property. I understand that my continued participation in Salvation Army activities depends on my support of this agreement.

Signature of Participant

Date

Complete if the Participant is a Minor

I represent that I am the parent/guardian of _____, who is under 18 years of age. I have read the above Permission/Waiver Form and am fully familiar with the contents thereof.

I give permission for the child named above to participate in the activities of The Salvation Army, including any special events/activities described above. In consideration for allowing the participation of the child in the activities of The Salvation Army, I hereby consent to the Permission/Waiver Form, including the Release of Liability above, on behalf of the child, and agree that this Permission/Waiver Form shall be binding upon me, my family, heirs, legal representatives, successors, and assigns.

Signature of Parent or Legal Guardian

Date

Print Name of Parent or Legal Guardian

Date

Signature of Witness

Date

