

NEW LIFE CHURCH-Sioux Falls

WAIVER, RELEASE OF LIABILITY, INDEMNIFICATION, & CONSENT TO MEDICAL ATTENTION

1. Activity Description, Location, and Dates:

Youth Camp at Okoboji, Iowa, from July 9-12 at Lutheran Lakeside. The address is 2491 170th St. Spirit Lake, IA 51360.

2. Transportation Permission:

The student will be picked up and dropped off at New Life Church. I give permission for my child to be transported in vehicles operated by New Life Church staff or approved volunteers. I understand transportation may include church-owned or personal vehicles.

3. Behavior Expectations

I understand that participants are expected to follow all rules and instructions from leaders. New Life Church reserves the right to dismiss any participant for inappropriate behavior. If dismissal occurs, I agree to arrange prompt pickup at my expense.

4. Voluntary Participation:

I understand and confirm that my participation in the activity is entirely voluntary and involves inherent risk, including but not limited to injury, illness, property damage, or death. The risks may arise from activities, transportation, facilities, weather conditions, or the actions of other participants or leaders.

I knowingly and freely assume all such risks, both known and unknown.

5. Identification of Risks:

I understand that my participation in the activity involves inherent risks of injury, loss, or death, including but not limited to:

- Transportation in personal vehicles operated by adult members of the Church;
- The use and condition of various modes of transportation, premises, facilities, and equipment;
- Lack of policies, rules, or regulations governing the activity;
- Negligence (ordinary or gross), actions, inactions, or misconduct by any participant, volunteer, staff member, or third party;
- The condition of medical facilities and/or medical treatment provided;
- Lack of supervision or inadequate supervision by New Life Church or its Representatives.

I further understand that this Waiver is intended to release New Life Church and its Representatives from liability for any aspect of my participation in the activity, including injury, disability, property damage, illness, emotional distress, or death.

6. Assumption of Risk:

I knowingly assume all risks, both known and unknown, foreseeable and unforeseeable, connected with my participation in the activity. I accept personal responsibility for any liability, injury, loss, or damage arising from my participation.

7. Release and Waiver:

I release and discharge New Life Church, its Elders, Pastors, officers, directors, employees, agents, volunteers, insurers, contractors, affiliates, and assigns (“Representatives”) from any and all liability or claims for injury, loss, damage, or expense (including attorneys’ fees) in connection with my participation in the activity—whether caused by negligence, gross negligence, or otherwise, to the fullest extent permitted by law.

8. Indemnification:

I agree to indemnify, defend, and hold harmless New Life Church and its Representatives from any claim or expense (including attorneys' fees) arising out of my child’s participation in the activity.

9. Binding Effect:

This agreement shall bind my relatives, personal representatives, heirs, beneficiaries, successors, and assigns, and shall inure to the benefit of New Life Church and its Representatives.

10. Consent to Medical Treatment:

I authorize New Life Church and its Representatives, if present, to provide or arrange emergency medical treatment for me or my child should it be deemed necessary. I consent to transportation and treatment by medical personnel of their choice if I cannot be reached. I understand that reasonable efforts will be made to contact me, but treatment may be given if I cannot be reached. I acknowledge that New Life Church does not assume any responsibility for the cost or outcome of any such medical treatment.

I accept full responsibility for any medical costs incurred.

11. Severability:

If any portion of this agreement is found invalid or unenforceable, the remaining provisions shall continue in full force and effect.

12. Applicable Law:

This agreement shall be governed, construed, and enforced in accordance with the laws of the State of Iowa, where the activity will occur.

13. Photographic Likeness:

I authorize New Life Church to use, publish, and share photographic likenesses or video images of me taken in connection with the activity, in any format and for any purpose consistent with the Church’s mission. I waive all rights of inspection, royalties, or claims related to such use.

IMPORTANT NOTICE:

This is a waiver of liability, indemnification, and consent. I understand that I am giving up substantial legal rights by signing below. I am signing this waiver, release of liability, indemnification, and consent voluntarily. This is a legal document. By signing, you are waiving certain rights, including the right to sue.

Student Name (Printed): _____

Student Signature: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

PARENT / GUARDIAN CONSENT (if participant is under 18)

If the participant is under age 18, a parent or a legal guardian (if applicable) must sign below:

I/we, the undersigned parent(s) or legal guardian(s) of the above-named minor, acknowledge that I/we have read and fully understand this Waiver and Consent. I/we give permission for my/our child to participate in the activity and agree to all terms stated herein.

In the event of an emergency, I authorize New Life Church to arrange for necessary medical treatment and agree to pay for such services. I release New Life Church and its Representatives from all liability arising from medical care provided in my absence.

Parent / Guardian Name (Printed): _____

Signature: _____ Date: _____

Parent / Guardian Name (Printed): _____

Signature: _____ Date: _____

Emergency Contact Information:

Name: _____

Phone: _____

Address: _____

City: _____ State: _____ Zip: _____