



Release and Liability Form for All 2020-2021 Events

STUDENT/CHILD NAME(S): _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE : _____ SHIRT SIZE: _____

GRADE: _____ DOB: _____ WEIGHT: _____

FATHER: _____ MOTHER: _____

ALT #: _____ ALT #: _____

EMAIL: _____

EMERGENCY CONTACT _____
NAME NUMBER

Insurance Provider: _____ Policy/Group #: _____

Family Doctor: _____ Phone Number: _____

Allergies/Restrictions: _____

Medications and Instructions: _____

Date of last Tetanus shot: _____

I, _____, consent for my student(s) to attend and participate in **ALL 2020-2021 Events at Fincastle Baptist Church including Fincastle Students**. In case of injury to my kid(s), I do authorize an adult sponsor of the church to make any necessary emergency medical decisions for my kid(s). This includes first aid, hospitalization, medical treatment, and transportation for my student(s) if needed.

I understand I will be contacted as soon as possible about serious injuries and/or treatment to my student(s).

I further state that I have carefully read and understand the foregoing release, know the contents hereof are true, and sign this release as a legally binding agreement.

I also give Fincastle Baptist Church permission to use photos that are taken containing the above mentioned minor on all events for church promotional uses.

Parent or Guardian Name and Signature

Name

Signed

Date



P.O. Box 707
7330 Roanoke Road
Fincastle, VA 24090
540.473.2861



Liability Form

In consideration for the opportunity to participate in the Student Ministry activities, the Participant (or parent/guardian if Participant is a minor) acknowledges and accepts the risks of injury associated with participation in and transportation to and from the Activities. The Participant (or parent/guardian) accepts personal financial responsibility for any injury or other loss sustained during the Activities or during transportation to and from the activities, as well as for any medical treatment rendered to the Participant that is authorized by employees, volunteers, or any other representatives of the Church. Further, the Participant (or parent/guardian) releases and promises to indemnify, defend, and hold harmless the Church for any injury arising directly or indirectly out of the described Activities or transportation to and from the Activities, whether such injury arises out of the negligence of the Church, the Participant, or otherwise.

By signing this agreement, I acknowledge the contagious nature of COVID -19 and voluntarily assume the risk that I, or my student, may be exposed to or infected by COVID-19 by participating in Fincastle Baptist Church, Inc.'s Student Ministry activities and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury (including, but not limited to personal injury, disability and death), illness, damage, loss, claim, liability, or expense, of any kind, that I, or my student, may experience or incur in connection with participation in Fincastle Baptist Church, Inc.'s Student Ministry activities ("Claims"). On my behalf, and on behalf of all assignees, heirs, executors, administrators, and personal representatives, I hereby release, covenant not to sue, discharge, and hold harmless Fincastle Baptist Church, Inc., and all respective employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of the released entities, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during or after participation in any program.

I further state that I have carefully read and understand the foregoing liability statements and sign this form as a legally binding agreement.

Name: _____

Signature: _____

Date: _____



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