

Community Presbyterian Church
Agreement Form
Valid 08/01/18-07/31/19

PLEASE READ THIS DOCUMENT CAREFULLY BEFORE SIGNING IT. IT AFFECTS THE LEGAL RIGHTS OF ALL PARTIES.

Authorization and Release for Medical Treatment

As the parent or legal guardian of _____ (minor(s)), each undersigned gives his or her authorization and consent for Community Presbyterian Church of Redmond, Oregon (the Church) and the Church's adult employees, agents, and volunteers (collectively with the Church, the "Community Presbyterian Church Parties/Agents") to seek, authorize, and consent to such medical or dental care for themselves, or a minor Participant ("Treatment") as any one or more of them may deem necessary or appropriate. Such Treatment (1) shall be provided upon the advice of and supervision by a physician, surgeon, dentist, or other medical practitioner licensed to practice under the laws of the state or jurisdiction in which such Treatment is sought, and (2) may include, without limitation, X-ray examination; anesthetic; medical, dental, or surgical diagnosis or treatment; and hospital care. This authorization for medical treatment or a photocopy hereof shall be as valid as an original.

I, the undersigned acknowledge and agree that the Church Parties shall not be legally or financially liable for any bill or expense incurred in, or any cause of action or claim arising from, the provision of any Treatment or the failure to provide or seek any Treatment. In consideration of Participant's presence at or engagement in one or more events sponsored by the Church, each of the undersigned hereby agrees to indemnify, defend, and hold harmless the Church Parties from and against any and all losses, damages, liabilities, or expenses (including, without limitation, reasonable attorneys' fees and other costs of defense) in connection with any and all actions, suits, claims, or demands that may be brought or instituted against any Church Party and arise out of or result from the provision of any Treatment or the failure to provide or seek any Treatment. This paragraph shall survive any termination or expiration of the Authorization for Medical Treatment for any reason.

Informed Consent/Indemnity/Release and Discharge of Liability

In consideration of the student being allowed to attend or participate in any of the Church's activities or programs, the undersigned acknowledges and agrees as follows:

Activities and Risks: I ACKNOWLEDGE THAT ALL PARTICIPATION IS VOLUNTARY.

The activities ("Activities" or "Program") led by the Church and Church Agents may include participation in various activities and events, including but not limited to: a variety of games, conversations, overnight trips, vehicular transportation, consumption of various foods/non-alcoholic drinks, interaction with other students, staff, and volunteers, moderate physical exertion, voluntary verbal self-disclosure in group and individual conversations, both onsite at the Church and at a variety of offsite locations. The activities led by the Church and its Agents may expose participants to certain risks, including but not limited to: moderate physical exertion, elevated heart rate, emotional upset, travel in various motorized vehicles, anxiety, stress, or embarrassment, moving about in indoor and outdoor settings, close personal contact with others, inadvertent contact with others, and the like. I, the undersigned, acknowledge that this description of activities and risks is not complete and that these and other conditions may result in all manner of physical or emotional trauma for Participants. I, the undersigned,, expressly assume all risks—inherent and otherwise, and whether or not described above—of participating in a program with the Church. I have discussed the activities and risks with the minor Participant who understands them and wishes to participate nonetheless.

Agreement, Release, Indemnity:

1. I, the undersigned hereby give my permission for myself, or the minor Participant, to participate in any program or event occurring with the Church and its Agents, and to be transported to, from and during the Events in any vehicle designated by an Agent of the Church.
2. I agree to indemnify, defend, and hold harmless the Church and the Agents (Church Parties) from and against any and all losses, damages, liabilities, or expenses (including, without limitation, reasonable attorneys' fees and other costs of defense) in connection with any and all actions, suites, claims, or demands that may be brought or instituted against any Church Party and that arise out of or result from the Participant being present at or engaging in the Program.
3. I hereby release, waive, and forever discharge the Community Presbyterian Church Parties from liability for, and covenant not to sue or commence arbitration against any one Church Party on the basis of, any bodily injury, emotional or mental harm, personal injury, illness, death, or property damage suffered by any person that arises out of or results from the Participant's participation in the Program, whether or not caused, in whole or in part, by the negligence of a Church Party. I make the foregoing release and discharge, and covenant not to sue or commence arbitration on behalf of myself, any other parent or legal guardian of the Participant, the Participant, and the heirs, executors, and assigns of each of the foregoing.
4. I understand and agree that Participant may be sent home at my expense if an Agent determines that the Participant has engaged in disruptive behavior or broken any rules at any time during an Event.
5. I agree that I, the undersigned, am responsible for any damage to the Church property or assets that is caused, in

whole or in part, by myself or the minor for whom I sign. I agree that the Church will not be responsible or liable in any manner for the Participant's personal property.

Media Release Agreement

Please be advised that all Participants may be photographed or videotaped at various church sponsored functions and activities. These photos and videos may be put on the church website and other social media outlets as well as printed media. By signing this document, the undersigned consents to these uses, without compensation, and releases CPC from any claim of violation of any personal right related to these uses.

I have carefully read, understand and voluntarily sign this Agreement and intend that it shall be effective and binding upon me, and/or my minor child or ward who is a Participant, and my or the child's family, heirs, executors, and representatives.

Name of Participant: _____ Signature: _____ Date: _____

Name of Parent/Guardian: _____ Signature: _____ Date: _____