

RADIUS STUDENTS

RADIUS CHURCH STUDENT PERMISSION FORM/WAIVER

STUDENT NAME: _____ BIRTHDAY: _____

PARENT/GUARDIAN NAME: _____ RELATION: _____

EVENT: _____ DATE OF EVENT: _____

Please read the following and sign below:*

Functions and Activities: It is my understanding that participating in the programs and recreational and other activities is a privilege. Prior to 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, and 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 form/waiver, I expressly warrant that the student named above is capable of withstanding both the physical and mental demands of the activities discussed above. I also expressly assume all risks of the student participating in the activities, whether such risks are known or unknown to me at this time. I further release this organization and its leaders, employees, volunteers, and agents from any claim that my student may have or that I may have against them as a result of injury, illness, or fatality 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 student's or my family or estate, heirs, representatives, or assigns may have against this organization or its leaders, employees, volunteers, or agents. I further agree to indemnify and hold harmless this organization and its leaders, employees, volunteers, or agents from any and all claims arising from my participation in its activities and programs, or as a result of injury or illness of my student during such activities.

First Aid and Emergency Medical Treatment: I recognize that there may be occasions where the student named above may be in need of first aid emergency medical treatment as a result of an accident, illness, or other health condition or injury. I do

hereby give permission for agents of this organization to seek and secure any needed medical attention or treatment for the student named above including hospitalization, if in the agent's opinion such need arises. In doing so I agree to pay all fees and costs arising from this action to obtain medical treatment. I give permission for RADIUS Church staff or volunteer staff to give over-the-counter medications as needed. I give permission to transport the student named above to a medical treatment center in a nonemergency vehicle in a medical emergency situation.

Transportation Permission: I (the named parent/guardian at the beginning of this form) give permission for my student (listed above) to be transported to and from locations, activities, and events associated with RADIUS Church and its programs. This includes locations of events not sponsored or created by RADIUS Church. Locations may include but are not limited to public locations, restaurants, other churches, retreat and camp destinations, venues, private residences, and more. I permit RADIUS Church staff, volunteers, leaders, and other licensed drivers chosen by RADIUS Church and its staff to transport my student(s) in any vehicle provided. This includes but is not limited to personal vehicles, vans, buses, and more. I waive, release, and discharge from any and all liability arising from the negligence or fault of the entities or persons released, for death, disability, personal injury, property damage, property theft, or actions of any kind which may hereafter occur to the student(s) including traveling to and from locations. I acknowledge that transportation to and/or from locations may involve risks of participants caused by terrain, machinery, weather condition, vehicular traffic, etc.. I indemnify, hold harmless, and agree not to sue the entities or persons associated with RADIUS Church activities from any and all liabilities or claims made as a result of participation in activities or events, whether caused by the negligence of release or otherwise.

I represent that I am the parent/guardian of the student being registered on this form, 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 student named above to participate in the activities of this organization, including any special events/activities described above. In consideration for allowing the participation of the student in these activities, I hereby consent to the permission/waiver form, including the Release of Liability above, on behalf of the student and agree that this permission/waiver form shall be binding upon me, my family, heirs, legal representatives, successors, and assigns.

SIGNATURE OF PARENT/GUARDIAN: _____

DATE: _____