

REGENERATION CAMPOUT2019 Waiver of Liability

Activity Information *(Please read the information outlined below carefully)*

Name of event's organization: Gulf Coast Community Church

Address: 555 76th Ave North, St Petersburg, FL 33713

Telephone: (727) 522-7734

Name of event's coordinator: Ryan Carver

Dates: March 13-14

Times: (3/13)12pm – (3/14) 12pm

Description of activity(s): Playing games outdoors, swimming, camping, hiking, and exploring @ Ft. Desoto.

Participant Information *(To be completed by participant or authorized guardian)*

Name of participant: _____

Name of parents/guardians: _____

Address: _____ Telephone: _____

Name of emergency contact: _____

Telephone (Day): _____ Telephone (Evening): _____

List allergies or medical conditions: _____

Activities you do not want your child to participate in: _____

Is GCCC authorized to approve medical treatment?

Yes

No

Is participant covered by personal/family medical insurance?

Yes

No

If yes, name of insurer: _____

Policy or group number: _____

Participation Agreement

In consideration for the opportunity to participate in the activities described above, 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 Gulf Coast Community Church or its staff employees, volunteers, or any other representatives (collectively referred to hereinafter as "Gulf Coast Community Church").

Participant Signature *(if 18 or older)*: _____ Date: _____

Parent(s)/guardian(s) signatures: _____ Date: _____

(If participant is a minor)

(Continued on back...)

NOTICE TO THE MINOR CHILD'S NATURAL GUARDIAN

READ THIS FORM COMPLETELY AND CAREFULLY. YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING THAT, EVEN IF GULF COAST COMMUNITY CHURCH USES REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM GULF COAST COMMUNITY CHURCH IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND GULF COAST COMMUNITY CHURCH HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM.

Participant Initial *(if 18 or older)*: _____ Date: _____

Parent(s)/guardian(s) initials: _____ Date: _____

(If participant is a minor)