



2018 MEDICAL AUTHORIZATION AND LIABILITY RELEASE

Minor Participant Name: _____
 School: _____ Grade: _____ Age: _____
 Student Cell #: _____ Student Email: _____
 Student Address _____
 City: _____ State: _____ Zip: _____
 Date of Birth: _____ Male Female

Parent Name: _____
 Parent Cell: _____ Phone Carrier: Verizon AT&T T-Mobile Other: _____
 Parent Email: _____

IN CASE OF EMERGENCY CONTACT:

Name: _____
 Home #: _____ Work #: _____ Cell #: _____

Family Doctor: _____ Phone #: _____
 Health Insurance Company: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Policy #: _____ Group #: _____
 Name of Primary Insured: _____
 Medical Issues/Allergies/etc.: _____
 Special Learning Disabilities: _____

MEDICAL AUTHORIZATION (APPLICABLE TO MINORS ONLY):

I, the undersigned parent having legal custody, other person having legal custody, or guardian of the above-named minor, pursuant to Family Code section 6900 et seq., hereby authorize any adult representative of ENCOUNTER, a California nonprofit religious corporation ("the Church"), into whose care the minor has been entrusted, to consent to medical care or dental care, or both, for the minor, including x-ray examination, anesthetic, medical, dental, or surgical diagnosis or treatment, and hospital care, under the general or special supervision of and upon the advice of or to be rendered by a duly licensed physician and surgeon or, in the case of dental care, by a duly licensed dentist, and to commit any of my insurance or other funds that may be required to carry out such medical and/or dental treatment.

This authorization is given in advance of any specific diagnosis, treatment, or hospital care being required for the purpose of providing authority and power on the part of the aforesaid agents to give specific consent to any and all such examination, diagnosis, treatment, and hospital care. This authorization shall remain effective through August 31, 2019, unless sooner revoked in writing and delivered to said agents.

I understand that the Church recommends that parents and guardians provide medical insurance for their child. I realize that any insurance provided by the Church is limited and does not cover all situations that may arise and that coverage provided by the Church is secondary to personal insurance and has a deductible.

RELEASE OF LIABILITY AND INDEMNITY AGREEMENT:

I, the undersigned parent having legal custody, other person having legal custody, or guardian of the above-named minor hereby authorize the minor to participate in activities sponsored by the Church, on and off Church premises. These activities may include but are not limited to air hockey, archery, baseball, basketball, bicycle riding, boating, canoeing, football, handball, hiking, fishing, golf, ice skating, paint pistol game, ping pong, riflery, rock climbing, roller blading, roller skating, skate boarding, snowboarding, snow skiing, snow sledding, snow tubing, soccer, strenuous games, surfing, swimming, tennis, track and field events, volleyball, water skiing, and other year-round and water related sports and activities.

I realize that each of these activities has inherent dangers and that unanticipated and unexpected dangers may arise during and associated with these activities. I voluntarily agree to accept any and all risks of injury, death, and damages of any nature resulting directly or indirectly from my participation or the participation of the minor in these activities.

In consideration of the benefits provided by the Church, I agree that neither I, my successors, assigns, nor anyone acting on my behalf will make any claim against or sue the Church, its officers, directors, employees, other agents, or volunteers as a result of my participation or the participation of the minor in these activities. In addition, I hereby release the Church, its officers, directors, employees, and other agents from all claims or lawsuits that I, my successors, assigns, or anyone acting on my behalf may now have or may hereafter at any time have for injury, death, or damage"; a) resulting from the condition of any improved facility that has been reasonably maintained, b) resulting from the condition of any unimproved facility, c) suffered by me or by the minor while participating in or traveling to and from these activities, or d) suffered by me or by the minor in any other activity associated with these activities. This release does not apply to intentional and/or willful acts of misconduct by the Church or any of its officers, directors, employees, other agents, or volunteers.

I understand that this release of liability and indemnity agreement is enforceable against me as a parent, other person having legal custody, or guardian of the minor but that it may not be enforceable against the minor when he or she becomes of age. Therefore, in further consideration for permitting the minor to participate in these activities, I agree to defend and hold harmless the Church, its officers, directors, employees, other agents, and volunteers against any such claim or lawsuit for injury, death, or damage, including without limitation loss or damage arising from or in any way connected with the minor’s participation in these activities. I also agree to reimburse the Church, its officers, directors, employees, other agents, and volunteers for any loss, damage, liability, cost, or expense they suffer as a result of any such claim or lawsuit brought against them by or on behalf of the minor.

Any controversy between the parties arising out of or related to this release and indemnity agreement or any claim against the Church or its officers, directors, employees, other agents, or volunteers, including without limitation the construction or application of this release and indemnity agreement, shall be settled by mediation and, if necessary, legally binding arbitration in accordance with the Rules of Procedure for Christian Conciliation of the Center for Conflict Resolution (CCR) in Pasadena, California. The edition/arbitration will be conducted by the CCR, but if unavailable, by the nearest Christian conciliation service affiliated with the Christian Legal Society, or by a similar organization agreeable to the parties. Parties agree that these methods shall be the sole remedy for any such controversy or claim and expressly waive their right to file a lawsuit in any civil court for such disputes (including their right to jury trial), except to enforce an arbitration decision. Each party agrees to pay its own attorney fees and the costs and fees of the mediation or binding that the party incurs.

PERMISSION FOR PHOTOGRAPHS/VIDEOTAPE:

I give permission for the child named on this form to be photographed or videotaped at/during any ENCOUNTER Kids activity for the purposes of 1) display during the Kids’ performances, 2) advertising of ENCOUNTER Kids’ activities, or 3) in offering a performance DVD and/or a CD of photographs for parents to purchase.

I have carefully read this medical authorization, release of liability, and indemnity agreement and permission for photography/videotaping of my child on the second page of this form and I fully understand its contents. I am aware that it is a release of liability and an indemnity agreement and that it is a legally binding contract between the Church and me, and I sign it of my own free will.

A photocopy of this document shall have the same force and effect as the original. I have read all information for my child to serve and/or participate and agree to it.

Signature: _____ Date: _____

Capacity (check one): Parent having legal custody Participant age 18 or over Court Appointed Guardian
Other person having legal custody