

## STOW ALLIANCE FELLOWSHIP of The Christian & Missionary Alliance RELEASE OF LIABILITY

We (I), on behalf of our (my) child-participant, assume all risk of personal injury, sickness, death, damage, and expense as a result of our child's participation in \_\_\_\_\_, provided such are not created by the negligent, willful, or intentional acts of Church staff and/or adult volunteer staff.

We (I) further agree to indemnify and promptly reimburse the Church, its Elders, Deacons, employees and/or agents for any loss or liability, including related expenses, sustained by the Church as the result of the negligent, willful, or intentional acts of our (my) child. Further, should it be necessary for the participant to return home due to medical reasons, disciplinary action or otherwise, we (I) hereby assume all transportation costs.

Participant: \_\_\_\_\_ Age: \_\_\_\_\_ Birth date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Have you filed a yellow  
Emergency Medical  
Release form for the  
current school year for  
your child?

Yes

No

\_\_\_\_\_  
Parent/ Guardian

\_\_\_\_\_  
Date

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City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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