## BETHANY COMMUNITY CHURCH RELEASE OF LIABILITY AND ASSUMPTION OF RISK

I understand that attending any off-campus event sponsored by Bethany Community Church includes some inherent risk, including but not limited to accident, personal injury, loss of property, and risks of vehicle travel. I am voluntarily planning to participate in this BCC event/trip with the knowledge of the dangers involved. In consideration of the right to participate in this event/trip, I hereby fully assume all risk of accident, illness, injury, death and/or property damage or loss suffered by me on account of or while engaged in this activity. I hereby fully discharge, release and agree to hold harmless Bethany Community Church and its agents, employees, officers, associates and the adult chaperons who are in attendance on the event/trip from all actions, claims, and demands for death, injury or damages resulting from my participation in the trip. This release of liability shall be binding upon me personally, and my estate. heirs, administrators, executors, assigns, and all members of my family. I further give the adult chaperons the authority to administer, arrange for, or give consent for any emergency medical or dental treatment for me. I have carefully read this agreement and fully understand it. I agree to all conditions set forth in the preceding paragraphs and I agree to cooperate fully with the adult chaperons & BCC staff in attendance on the trip.

wy insurance Coverage:		
Physician Contact:	Phone: ( <u>)</u> -	
Person(s) to notify in case of emergency:		
Name:	Phone: ( <u>)</u> -	
Relationship:		
Name:	Phone: ( <u>)</u> -	
Relationship:		
HEALTH INFO	ORMATION	
Allergies: (foods, medicines, pets, smoke, bee	es, etc.)	
Physical needs/issues that may require assist	tance or accommodation:	
Name (please print):	DOB:	
Signature:	Date:	