



SHORT-TERM MISSION TRIP

ADULT LIABILITY RELEASE

PARTICIPANT MUST READ AND COMPLETE THIS FORM. IN THE EVENT OF AN EMERGENCY, THIS FORM WILL BE ESSENTIAL FOR APPROPRIATE CARE.

I acknowledge that my participation in the Mission Hills Church Short-Term Mission Trip is voluntary and may require involvement in activities that require traveling or physical exertion. Such activities may include, but are not limited to, camps, athletic games, excursions, mission trips and meetings. I acknowledge that my participation in any Mission Hills Church activity presents risks that I may suffer property damage, bodily injury, or death. Therefore, in consideration of my participation in the Mission Hills Church activities, I agree to the following:

PLEASE INITIAL EACH STATEMENT:

- _____ Mission Hills Church is not responsible for my personal belongings.
- _____ I consent to have photographs taken of myself during the Mission Hills Trips and activities. The pictures may be used on the Mission Hills Web Page, in future brochures, or in slide shows during and/or after the event without compensation or notification.
- _____ I am required to wear seat belts while riding in church provided transportation other than rental buses. I am responsible to keep my seat belt on while en-route to activities.
- _____ I hereby take the following action for myself, my executors, administrators, heirs, next of kin, successors and assigns: a) I waive, release, and discharge from any and all claims or liabilities for death or personal injury Damages of any kind, which arise out of or relate to my participation in Mission Hills Church activities, the following person or entities: Mission Hills Church, its Senior Pastor, Associate Pastors, Program Staff, Elders, employees, volunteers, representatives, subcontractors and agents of any of the above; b) I agree not to sue any of the persons or entities mentioned above for any of the claims or liabilities that I have waived, released or discharged herein; and c) I indemnify and hold harmless the person or entities mentioned above from any claims made or liabilities assessed against them as a result of my actions. I agree to indemnify and hold harmless the persons or entities mentioned above for any claims or liabilities assessed against them because of any insufficiency of my legal capacity or authority to act for and on behalf of myself in the execution of the Waiver and Release.
- _____ I hereby authorize any qualified or licensed medical provider to treat myself for the purpose of attempting to treat or relieve any injury received. I authorize any such medical Provider to perform all procedures deemed medically advisable. I realize and appreciate that there is a possibility of complications and unforeseen consequences in any medical treatment, and I assume any such risk for and on behalf of myself. I further agree to pay or have paid by others all charges for the dental, medical, or hospital care or treatment.
- _____ **I hereby assume the risks of my Participation in all Mission Hills Church Activities.**

PRINT NAME: _____

DATE: _____

PARTICIPANT SIGNATURE: _____