



Crosspoint Recreation Ministry Athletic Program Participation Consent and Liability Release

Please fill in all information. Write "N/A" where needed.

Name _____ Age _____ DOB _____

Address _____

Parent's Name (if under 16) _____

Phone _____ Email _____

I certify that I am the parent or legal guardian of the above-named child and that my child has my permission to participate in athletic programs offered through the Crosspoint Church Recreation Ministry: (e.g., soccer, volleyball, cheerleading, basketball, football, baseball, softball, track, cross country, fitness center etc.)

I understand that participation in any of the above-named Programs involves potential for injury or illness and that the Ministry will not be held liable for any injuries or illnesses resulting therefrom. If my child has medical conditions that may impact his or her participation in the Program, I have described them on a separate form. I accept full responsibility for the management of my child's medical condition(s) and understand that the Ministry will not be held responsible for any incidents or complications related to my child's medical condition that result from participation in the Program.

I give permission to have my child treated in case of medical emergency. In the event of a medical emergency and I cannot be reached, I hereby authorize the Ministry's staff or volunteers, and/or emergency and medical personnel to make emergency medical decisions for my child. I acknowledge that the Ministry does not provide any health insurance covering my child during the activities referred to herein and that it is my responsibility to obtain health insurance covering my child. I agree to accept the sole responsibility for the costs of medical care.

I also grant permission to the Ministry and its representatives, contractors, employees and volunteers acting on behalf of the Ministry, to take and/or use, copyright, publish, edit, crop or treat images or likenesses of me or my child/children, including photographs, videos or otherwise, for any lawful use on the Ministry's website, social media pages, blogs, or in other official Ministry printed or electronic publications without further consideration. I understand that this consent and release will operate in full force and effect until such time as I withdraw my consent in writing. I understand that should photographs or videos of me or my child/children be used on Ministry-owned or operated websites or webpages, they may be available for download.

For Office Use Only
Circle one: Open Court / Fitness Membership
/ Other _____

I UNDERSTAND AND HEREBY AGREE TO ASSUME ALL THE RISKS WHICH MAY BE ENCOUNTERED AT OR DURING THE PROGRAM SPONSORED BY THE MINISTRY THAT MY CHILD WILL BE ATTENDING OR PARTICIPATING. In consideration thereof and for other valuable consideration, the receipt of which is acknowledged, I hereby **AGREE TO RELEASE, DEFEND, INDEMNIFY, AND HOLD HARMLESS** the Ministry and its agents and employees from any and all past, present, and future, known and unknown liabilities, actions, causes of action, claims, expenses, personal injuries, and damages, **INCLUDING THOSE CAUSED BY THE NEGLIGENCE OR FAULT OF THE MINISTRY, ITS LEADERS, EMPLOYEES, OR VOLUNTEERS**, and including without limitation, interest, penalties, court costs, attorney's fees and expenses resulting from or on account of injury to my child, myself, or my property in connection with any event anticipated by this form. **I FURTHER RELEASE** any and all claims brought by or through me, including claims for loss of consortium and all similar claims based on relationships with other people.

I EXPRESSLY AGREE that this release, waiver, and indemnity agreement is intended to be as broad and inclusive as permitted in the State of Florida and that if any portion hereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. **I ALSO AGREE** that any controversy or claim, by or through the party signing this release, arising out of or relating to the activities anticipated by this form shall be settled by binding Christian arbitration conducted by the National Center for Life and Liberty or another Christian arbitrator, and judgment on the award may be entered in any court having jurisdiction. This release contains the entire agreement between the parties hereto, and the terms of this release are contractual and not mere recitals.

I FURTHER STATE that I have carefully read the foregoing consent and liability release and know the contents thereof and I sign this document as my own free act. This is a legally binding agreement which I have read and understand.

Primary emergency contact person & phone _____

Participant/Parent or Guardian signature _____

Date _____

Relationship to minor (Mom/Dad/Guardian) _____

Note: List any medical conditions that the staff needs to be aware of.
