Liability Release Agreement for St. George's Youth Ministries Activity

Participant: _____

Activity Name: _____ Date:_____

Parent(s)/Legal Guardian: _____

Background: Although no danger or risk is anticipated in the ordinary course of St. George's Anglican Church Youth Group (henceforth known as SGACYG) activities, the possibility of such injury may result from any activity. Those risks may include, but are not limited to, sickness, personal injury, loss or damage to personal property, or death. Travel, if to unpopulated and remote areas, where medical attention is not readily accessible, or over rugged terrain at high altitudes, presents inherent dangers, including, but not limited to adverse or changing weather conditions, and other hazards natural to outdoor activities. I understand that SGACYG does not provide physicians, nurses or emergency medical technicians at the site of the activity to assist in the event of injury or illness during this activity.

Medical Release: In case of emergency involving a serious injury or illness, I understand that every effort will be made to contact and receive consent from my emergency contact person or follow my instructions which have been given on this form. In the event that they cannot be reached or time is of the essence, I hereby give permission to the leaders of SGACYG to seek and consent as my agent to treatment (including hospitalization, x-rays, anesthesia, and/or surgery) for my child. I assume responsibility for all medical care and treatment sought. I agree to pay for and be responsible for all costs connected with medical care or transportation under emergency conditions. I have indicated insurance coverage beneath my signature.

Release: Participant's parents/legal guardian hereby release St. George's Anglican Church, including SGACYG, other churches belonging to the Convocation of Anglicans in North America in the United States, (henceforth known as CANA) and their officers, directors, employees, staff and volunteers from any and all claims or demands, whether based on negligence or otherwise, for injuries or damages arising out of the acts or omissions of the independent contractors employed by all CANA churches such as transportation companies, restaurants, places of lodging, tour guides, doctors and dentists; the acts or omissions of other participants or strangers; the acts or omissions of CANA, their officers, directors, employees, SGACYG staff and volunteers. This agreement applies to all phases of the above activity, including transportation from St. George's to the activity, transportation from the activity back to St. George's, and all transportation while participating in the above activity. I understand that all drivers, unless informed otherwise, are 21 years of age or older, but are not professional drivers.

Indemnification: Participant's parent or legal guardian agrees to indemnify, defend and hold harmless CANA, their officers, directors, employees, SGACYG staff, or volunteers against any and all claims, demands, losses, costs, expenses and liabilities which may be incurred, whether based on negligence or otherwise, which may be brought by or on behalf of the participant or parent, and participant or parent hereby agrees to reimburse CANA, and their officers, directors, employees, staff and volunteers from any and all expenses that may be incurred in connection with the assertion of such claim, by or on behalf of a participant or parent including court costs and reasonable attorney's fees. Nothing in this indemnification obligation shall be construed to limit in any manner any insurance coverage that any party may have applicable to any claim, demand, loss, cost, expense, or liability covered by this provision.

On behalf of the participant, I consent to the terms of the Agreement and consent to his or her participation in all activities of the SGACYG on the terms stated. The undersigned agrees that upon admission and participation into the above event, he/she will be bound by the terms of the Agreement. The undersigned acknowledges that he/she has read and understands the terms of this Agreement. Colorado law shall apply to this Agreement. This Agreement supersedes and nullifies any previous agreement, implied or expressed between CANA and the undersigned.

Date_____ Signature of Participant (if over 18)_____
Print Name_____

Date_____ Signature of Parent/Legal Guardian_____
Print Name_____

In case of emergency, please contact:

_____
Name

_____
Phone number

_____
Insurance Company Policy Number Telephone Number

_____
Known Allergies and Current Medications

Special instructions (use back if necessary):