

have read, understand and accept the following:



## Student Release Form [September 1, 2023 - August 31, 2024]

Every participant must have a completed and signed participant release and waiver form on file with the Pathway Community Church office for all youth events, activities, groups, overnight trips, camps, or any other programs sponsored, conducted, or hosted by Pathway Community Church.

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PERSONAL INFORMATION				
Student Name			_ Grade	Gender M F
Address				
City				
Student Phone Number				
Email Address		_School Attended		
Name of Parent/Legal Guardian				
Parent's Email Address		_ Parent's Cell Nu	mber	
IN CASE OF EMERGENCY, PLEASE CONTA	СТ			
1) Name	_ Phone			_
Relationship				
2) Name	Phone			
Relationship				
MEDICAL INFORMATION				
Is the Student currently insured? Yes • No •				
Insurance Company				
Policy Number				
Physician				
Physician's Phone				
Ι,	th	e undersigned pa	rent or legal guard	ian of
				in exchange for Student bei
allowed to participate in Pathway Community Church				
such Pathway Community Church Programs and in d	•		•	

Assumption of the Risk: I, on behalf of the Student, acknowledge and agree that participation in the Pathway Community Church Programs and activities related to the Pathway Community Church Programs necessarily exposes the Student to risks, including, but not limited to risks from (i) traveling to and from a venue with leaders, volunteers, parents, Pathway Community Church staff, or others, (ii) safety hazards from participation in the Pathway Community Church Programs, and (iii) other risks that might arise from the action, inaction or negligence of myself, the Student, leaders, volunteers, parents, Pathway Community Church staff, or others involved in the Pathway Community Church Programs, and that these risks necessarily include, but are not limited to the possibility of mental, emotional, or physical illness or injury (minimal, serious, catastrophic and/or death) and that I, for myself and on behalf of the Student, acknowledge that Student is expressly assuming the risk of any and all such illnesses or injury(ies) by participating in the Pathway Community Church Programs.

Release of Liability. I, for myself and on behalf of the Student, and on behalf of the heirs or personal representatives of myself and Student, and anyone else claiming through me or Student, to the greatest extent lawfully permissible under the laws of the Commonwealth of Pennsylvania, further agree to and do hereby release and hold harmless Pathway Community Church, any and all officers, employees, elders, directors, volunteers and agents of Pathway Community Church, and all those involved with the Pathway Community Church Programs from any and all liability of any nature whatsoever, including but not limited to liability for (i) negligence,

(ii) property loss, or (iii) any other claim, judgment, loss, liability, cost and expense (including, without limitation, attorney's fees and costs), arising out of or in any way related to or connected to the Pathway Community Church Programs, including, without limitation, any claim arising out of or connected with any illness or injury (minimal, serious, catastrophic and/or death) that Student may incur or sustain during the Pathway Community Church Programs or by reason of their participation in the Pathway Community Church Programs (including, but not limited to, all activities associated with the Pathway Community Church Programs, traveling to and from the Pathway Community Church Programs and anything that might happen at the site of the Pathway Community Church Programs or at Pathway Community Church prior to, during or following the Pathway Community Church Programs) whether or not the Pathway Community Church Programs actually occur.

**Indemnity**. I further agree to expressly indemnify and hold harmless Releasees and their respective heirs, successors, assigns, and personal representatives against any loss from any further claims, demands or actions that may subsequently be brought by Student or by any other persons on the account of damages of any kind (i) resulting to Student, or (ii) caused by Student, in any way from the Student's participation in the Pathway Community Church Programs. I further agree to reimburse and to make good to Releasees any loss or costs, including, but not limited to attorney's fees, Releasees may have to pay as a result of any such actions, claim or demand.

Appearance Agreement. I understand that Pathway Community Church, from time to time, creates or produces various media materials and presentations relating to the Pathway Community Church Programs, in various mediums including, but not limited to photographs, video, audio recordings, websites, etc., (collectively "Program Media")). I understand that as a Participant and/or spectator at the Pathway Community Church Programs the Student may be included in Program Media taken during the Pathway Community Church Programs. Therefore, without reservation or limitation, I, for myself and on behalf of the Student, hereby assign, transfer and grant to Pathway Community Church a royalty free, non-exclusive and perpetual right, license and privilege to record Student in its Program Media and to utilize such Program Media and Student's name, face, likeness, voice, and appearance as a part of the Pathway Community Church Programs as well as in advertising or promoting the Pathway Community Church Programs, now or in the future. I further understand that neither Pathway Community Church, nor any third party, is under any obligation to exercise any of the foregoing rights, licenses and privileges.

**Medical Release**. I hereby authorize Pathway Community Church to obtain medical treatment (if necessary) for Student and hereby, for myself and on behalf of the Student, release and hold harmless Releasees in the exercise of this authority. I further understand and acknowledge that I will be responsible for any and all medical costs or related bills that may be incurred on behalf of Student for any illness or injury that Student may sustain during the Pathway Community Church Programs (including, but not limited to, all activities associated with the Pathway Community Church Programs, traveling to and from the Pathway Community Church Programs and anything that might happen at the site of the Pathway Community Church and/or on site at Pathway Community Church prior to, during or following the Pathway Community Church Programs).

I, represent and acknowledge that the Student takes the following medications in the prescribed amounts as indicated, and suffers from the following allergies and special conditions (mental, emotional and/or physical (collectively "Special Conditions")).

## Medications (if any): Allergic to (if any):

## **Special Conditions (if any):**

I represent that any medication to which Student is allergic or medications that Student is currently taking are listed above. I agree that Student shall bring medications that Student is currently taking with Student to the Pathway Community Church Programs and that Student shall consume only the prescribed dosage of such medications. I further represent and warrant that the above identified (i) prescribed dosage(s) of medications; (ii) allergies; and/or (ii) Special Conditions; shall not, in any way, shape or form whatsoever, impair Student's ability to participate in the Program(s).

I, for myself and on behalf of the Student, (i) acknowledge, represent and warrant that I have read this Participant Release and Waiver Form in its entirety and fully understand its contents and meaning, (ii) am aware that this Participant Release and Waiver Form releases Releasees from liability and contains an acknowledgement of my voluntary and knowing assumption of the risk of injury or illness and (iii) further acknowledge that nothing in this Participant Release and Waiver Form constitutes a guarantee that Pathway Community Church Programs will occur. To the extent that any provision or portion of this Participant Release and Waiver Form is held invalid, the balance shall continue in full force and effect.

I,, the ("Student" or "Participant"), expressly declare and represent to Pathw the terms and conditions stated above.	e undersigned parent or legal guardian of the minor stated above vay Community Church that I have read, understand and accept
Signature of Pastor, acknowledging the receipt of this signed form:	