**Waiver and Release of Liability**

I, the undersigned, am a person at least 18 years of age, and I desire to voluntarily participate in

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (the “Program”), sponsored by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (“The Church”).

I acknowledge that such Program may be hazardous and I hereby assume all responsibility and risk for any accidents, sickness, or other mishaps, including, but not limited to, serious bodily injury, permanent disability, and/or death, that may result to me on the Program. In connection with my participation in the Program, I hereby waive my rights to any claim, cause of action, and/or the right to file a law suit against The Church, or against any of its affiliates, parent organizations, directors, officers, sponsors, employees, agents, volunteers, successors and assigns. I further release all such organizations and/or persons from any and all responsibility or liability of any nature whatsoever for any loss or damage to my person or property, including, but not limited to, personal injury and/or death sustained on or through the Program.

This Waiver and Release of Liability is binding upon my personal representatives, trustees, heirs, successors, beneficiaries, relatives, next of kin or assigns and shall inure to the benefit of all organizations named herein as well as to their directors, officers, sponsors, employees, agents, volunteers, successors and assigns.

If any provision of this document is held to be invalid or unenforceable, this form shall be construed as if the invalid or unenforceable provision was not contained in the document.

**I have carefully read this Waiver and Release of Liability. By my signature, I am stating that I understand, agree to, and accept all of its provisions, and understand that I am giving away substantial legal rights.**

Signed this \_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Printed Name**