

2022 Presbyterian Church of Western Springs "Golden Ticket" Event

Minor Travel General Release and Hold Harmless Agreement

-5250 Wolf Rd, Western Springs, IL 60558-

Participant's Name: _____

Address: _____

City: _____

Zip: _____

Home Phone: _____

Emergency Contact Name: _____

Emergency Contact Phone: _____

Date of Event: _____

I, _____, am the parent or legal guardian of the above Participant (the "**Minor**"), who desires to participate in various programs, events or activities **inside the United States** (hereinafter collectively referred to as the "**Activities**") operated or sponsored by Presbyterian Church of Western Springs ("**PCWS**" or the "**Church**"). I understand and acknowledge that the Church will not allow the Minor to participate in the Activities without my first releasing and holding the Church harmless from any liability arising out of the Minor's participation in the Activities as provided in this Minor Travel General Release and Hold Harmless Agreement. I have assessed the risks involved in the Minor's participation in the Activities and fully understand and assume such risks on behalf of such Minor, including the risk that the Minor may suffer or experience, among other things, personal injury or bodily damage, medical disabilities, loss or theft of personal property.

FOR GOOD AND VALUABLE CONSIDERATION, THE RECEIPT AND SUFFICIENCY OF WHICH ARE HEREBY ACKNOWLEDGED, I HEREBY CONSENT TO THE MINOR'S PARTICIPATION IN THE ACTIVITIES, AND I, ON BEHALF OF MYSELF, THE MINOR, AND THE MINOR'S HEIRS, EXECUTORS, ADMINISTRATORS, LEGAL REPRESENTATIVES, AND ASSIGNS, HEREBY RELEASE, FOREVER DISCHARGE AND AGREE TO HOLD HARMLESS THE CHURCH, ITS DIRECTORS, OFFICERS, AFFILIATES, CONTRACTORS, AGENTS, EMPLOYEES, VOLUNTEERS, AND ALL PERSONS, FIRMS OR ENTITIES ACTING UNDER THEIR PERMISSION OR AUTHORITY, FROM ALL ACTIONS, CAUSES OF ACTION, INJURIES, CLAIMS, DAMAGES, RANSOM DEMANDS, COSTS OR EXPENSES OF ANY KIND, GROWING OUT OF OR RELATED TO ANY SUCH ACTIVITIES IN WHICH THE MINOR PARTICIPATES. I UNDERSTAND THAT THIS IS A FULL AND COMPLETE RELEASE OF ALL INJURIES AND DAMAGES WHICH I OR THE MINOR MAY SUSTAIN AS A RESULT OR HIS/HER PARTICIPATION IN ANY OF THE ACTIVITIES, REGARDLESS OF THE SPECIFIC CAUSE THEREOF, INCLUDING DUE TO THE SOLE OR PARTIAL NEGLIGENCE OF PCWS.

I hereby represent and warrant that I am the parent or guardian of the Minor, I am over twenty-one years of age, and am competent to contract in my own name, and that the Minor does not have any physical limitations, medical ailments, or physical or mental disabilities that would limit or prevent the Minor from participating in the Activities. I have read the foregoing consent and release and understand the terms thereof and, in consideration of the value recited above, I hereby grant the authorizations, and execute the releases all as set forth above, and that I have been given the opportunity and encouraged to seek independent legal advice prior to signing this Agreement. I acknowledge and agree that I have given my consent for the Minor to remain in the custody of the Church's representatives while participating in the Activities.

_____ **Initial**

MEDICAL TREATMENT AUTHORIZATION AND POWER OF ATTORNEY. If, in the reasonable belief that Minor requires medical treatment, intervention, or care (without limitation) and reasonable attempts to contact me have been unsuccessful, I hereby appoint the PCWS Youth Director or designated chaperones or volunteers of PCWS as my agent ("**Agent**") to act for me and in my name (in any way I could act in person) to make any and all decisions for the Minor concerning his or her personal care, medical treatment, hospitalization and health care. This power of attorney and delegation of authority shall terminate when the Agent is first able to contact me.

_____ **Initial**

PHOTOGRAPHY RELEASE. I permit PCWS to use photographs and video recordings of said Minor for promotional or informational use as it sees fit, including, but not limited to, newsletters, social media, blogs or websites. Ownership of Minor's likeness shall remain with said Minor.

_____ **Initial**

TRANSPORTATION AGREEMENT. I give permission for my child to be transported by car, van or bus from PCWS to an off-campus event, and then back to the Church, with a chaperone approved by the Church.

_____ **Initial**

The undersigned agrees to the above and acknowledges and agrees this Minor Travel General Release and Hold Harmless Agreement is binding on the Minor's and my respective heirs, successors, assigns, and personal representatives.

(Sign Full Name) Parent or Legal Guardian

Date

(Print Full Name) Parent or Legal Guardian

Date

<p>Additional Medical Information:</p> <p>Medications my child is currently taking: _____</p> <p>Reason: _____</p> <p>Dosage: _____</p> <p>Allergies: _____</p> <p>Further Instructions: _____</p>
