



Activity Participation Agreement

Activity Information

Sponsor: Lizella Baptist Church, Inc.

Address: 2950 S. Lizella Road, Lizella, GA 31052

Telephone: (478.361.8428)

Event Coordinator: _____

Telephone: (____.____.____)

Description of activity: _____

Event Date & Location: _____

Participant Information

Participant Name: _____

Parent/Guardian(s): _____

Address: _____ **Telephone:** _____

Emergency Contact: _____

Telephone (work): _____ **Telephone (Cell):** _____

Allergies/Medical Concerns: _____

Is sponsor authorized to approve medical treatment? ____ Yes ____ No **Have Insurance?** ____ Yes ____ No

If yes, name of insurer: _____

Policy or group number: _____

Physician: _____ **Office Phone:** _____

Consent Agreement - Medical Release – Waiver/Release of Liability

I acknowledge that participation in the activity described above involves risk to the Participant, and may result in various types of injury including, but not limited to, the following: worsening sickness, bodily injury, death, emotional injury, personal injury, property damage and financial damage. In consideration for the opportunity to participate in the activity described above (the "Activity"), the Participant (or parent/guardian if Participant is a minor) acknowledges and accepts the risks of injury associated with participation in and transportation to/from the Activity. The Participant (or parent/guardian) accepts personal financial responsibility for any injury or other loss sustained during the Activity or during transportation to and from the activity, as well as for any medical treatment rendered to the Participant that is authorized by the Sponsor or its agents, employees, volunteers, or any other representatives (collectively referred to hereinafter as the "Activity Sponsor"). Further, the Participant (or parent/guardian) releases and promises to indemnify, defend, and hold harmless the Activity Sponsor for any injury arising directly or indirectly out of the described Activity or transportation to and from the Activity, whether such injury arises out of the negligence of the Activity Sponsor/volunteers/representatives, the Participant, other Participants, or otherwise.

If a dispute over this agreement or any claim for damages arises, the Participant (or parent/guardian) agrees to resolve the matter through a mutually acceptable alternative dispute resolution process. If the Participant (or parent/guardian) and the Activity Sponsor cannot agree upon such a process, the dispute will be submitted to a three-member arbitration panel for resolution pursuant to the rules of the American Arbitration Association.

I hereby give full permission to Lizella Baptist Church, Inc, its staff, representatives and volunteers to obtain medical care from any licensed physician, hospital or medical clinic. I accept complete responsibility and agree to pay for any and all associated fees or charges, holding the Activity Sponsor harmless and free of any liability for charges or claims arising from injury or loss as a result of participation in this activity.

Further, having been informed of the intentions of the Sponsor to provide fitness activities & equipment, I assume all risks and hazards incidental to the conduct of the activity and do hereby release, absolve, indemnify, and hold harmless Lizella Baptist Church, Inc. In case of injury, I hereby waive all claims against the Sponsor, organizers, coordinators, instructors, supervisors and volunteers. I understand that damage to fitness equipment or facilities shall be my responsibility and will report any such damage, as well as resulting injury, immediately to Lizella Baptist Church, Inc.

Participant Signature: _____

Date: _____