Stellar VBS 2023
Participation Waiver

Consent to Treatment, Photographic Release, and Insurance Disclaimer

CHILD(REN) NAME (S) :

Consent to Emergency Medical and Dental Treatment:

As the parent, domestic partner, or authorized representative, I hereby give consent to Spirit of Joy and its employees and volunteers to obtain all emergency medical or dental care prescribed by a duly licensed physician (M.D.), Osteopath (D.O.), or Dentist (D.D.S.) for my child(ren). This care may be given under whatever conditions are necessary to preserve the life, limb, or well being of the child named above.

Parent/ Guardian Printed Name _____

Signature _____

Date _____

Photographic and Video Release:

Throughout the event, there may be activities, events, or media releases that could result in your child being photographed. You agree that Spirit of Joy may use these photographs in promotions for the program, publish them with local articles, or use them to produce center yearbooks or videos. If you would NOT like your child to participate in activities such as these, you must notify the program in letter form, and they will ensure that your child is not photographed in the program.

Parent Printed Name _____

Signature _____

Date _____

Insurance Disclaimer:

Spirit of Joy does not carry health or accident insurance on its participants. All expenses incurred in the treatment of illness, injuries, or accidents will be the responsibility of the participant and his/her parents.

I have read, understand, and accept the above conditions.

Parent Printed Name _____

Signature _____

Date _____

SPIRIT OF JOY LUTHERAN CHURCH RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT

IN CONSIDERATION of being permitted to utilize the premises, facilities, and services, and programs of Spirit of Joy Lutheran Church (hereinafter SOJ), (or for my children to so participate) for any purpose, including, but not limited to observation or use of facilities or equipment, or participation in any off-site program affiliated with SOJ, the undersigned, for himself or herself and such participating children and any personal representatives, heirs, and next of kin, hereby acknowledges, agrees, and represents that he or she has, or immediately upon entering or participating will, inspect and carefully consider such premises and facilities that host the program. It is further warranted that such entry onto the SOJ facilities for observation or use of any facilities or equipment or participation in such affiliated program constitutes an acknowledgment that such premises and all facilities and equipment thereon and such affiliated program have been inspected and carefully considered and that the undersigned finds and accepts the same as being safe and reasonably suited for the purpose of such observation, use or participation by the undersigned and such children.

IN FURTHER CONSIDERATION OF BEING PERMITTED TO ENTER SOJ FOR ANY PURPOSE INCLUDING, BUT NOT LIMITED TO OBSERVATION OR USE OF FACILITIES OR EQUIPMENT, OR PARTICIPATION IN ANY OFF-SITE PROGRAM AFFILIATED WITH SOJ, THE UNDERSIGNED HEREBY AGREES TO THE FOLLOWING:

1. THE UNDERSIGNED ON HIS OR HER BEHALF AND BEHALF OF SUCH CHILDREN, HEREBY RELEASES, WAIVES, DISCHARGES, AND COVENANTS NOT TO SUE SOJ and all branches thereof; its directors, officers, employees, and agents (hereinafter referred to as "releasees") from all liability to the undersigned or such children and all his personal representatives, assigns, heirs, and next of kin for any loss or damage, and any claim or demands therefore on account of injury to the person or property resulting in death of the undersigned or such children whether caused by the negligence of the releasees or otherwise while the undersigned or such children is in, upon, or about the premises or any facilities or equipment therein or participating in any program affiliated with SOJ.

2. THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the releasees and each of them from any loss, liability, damage, or cost they may incur due to the presence of the undersigned or such children in, upon, or about SOJ's premises or in any way observing or using any facilities or equipment of SOJ or participating in any program affiliated with the SOJ whether caused by the negligence of the releasees or otherwise.

3. THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH, OR PROPERTY DAMAGE to the undersigned or such children due to the negligence of releasees or otherwise while in, about or upon the premises of SOJ and/or while using the premises or any facilities or equipment thereon or participating in any program affiliated with SOJ.

THE UNDERSIGNED further expressly agrees that the foregoing RELEASE WAIVER AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the law of Florida and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representations, statements, or inducement apart from the foregoing written agreement have been made.

I HAVE READ AND UNDERSTOOD THIS DOCUMENT AND RELEASE:

Date: _____

Name of Child(ren) in Program: _____

_____

Parent/Guardian/Representative: _____

Print Name: _____

Signature: _____