

RECREATIONAL ACTIVITY PHOTOGRAPHIC AND LIABILITY RELEASE
AGREEMENT (Under 18 years of age)

The minor, _____ (herein "Participant"), wish to participate in a recreational activity (herein the "Activity") sponsored by IBC Soccer Camp, a ministry of Immanuel Bible Church. This Activity is scheduled to take place from _____ to _____. Ministry, Participant, and Participant's parent(s)/legal guardian(s) (herein "Guardian") agree that the Activity poses potential Risks. "Risks" include, but are not limited to, the following: Encountering or experiencing sickness, illness, disease, accident, injury or damage to Participant's person or personal property, or even death both during Activity and while traveling by plane, bus, train, car, truck, van or any other vehicle to and from the Activity location; Any and all inherent risks associated with travel or participating in Activity; Loss or destruction of Participant's personal property; Head trauma; Broken bones; Injury to or loss of limbs; or Medical complications related to a pre-existing condition of which Ministry was unaware. For and in consideration of Ministry allowing Participant to participate in the Activity and other good and valuable consideration the receipt and sufficiency of which is acknowledged, Participant and Participant's personal representatives, assigns, heirs, distributes, guardians and next of kin (herein the "Releasors") release, waive, discharge and covenant not to sue Ministry and its officers, employees, and agents (herein the "Releasees"), from all liability to the Releasors, on account of injury to Participant or death to Participant or injury to the property of Participant, whether caused by the negligence of Releasees or otherwise, while Participant is participating in the Activity. Participant and Guardian are fully aware of the Risks and other hazards inherent in the Activity and are allowing Participant to participate in the Activity, and voluntarily assumes the Risks and all other risks of loss, damage, or injury that may be sustained by Participant while participating in the Activity. Participant and Guardian acknowledge that as a part of this Release they shall be 100% liable to pay for all medical expenses resulting or to result from any injury incurred during, or as a result of, participation in the Activity. Furthermore, Participant and Guardian understand that Participant's voice or image may be recorded at this Activity or in travel to and from the Activity location. Participant and Guardian irrevocably grant to Ministry the perpetual, royalty free license and permission to use, reuse, publish, republish Participant's voice, likeness and photograph, and to the extent provided by Participant, name and biography, as included in video or audio recordings or photographs from the event, in whole or in part, at Ministry's sole discretion, in conjunction with the Ministry Uses and promotion thereof. Ministry Uses include, but are not limited to, DVDs, photographs, cassettes, compact discs, transcripts and publications in written, electronic, digital and other formats now existing or later developed for sale, license, distribution, transmission or posting or download from the Internet. Participant and Guardian warrant that they have fully read and understand this Liability Release Agreement and voluntarily sign the same, and that no oral representations, statements or inducements apart from the foregoing written agreement have been made to Participant or Guardian.

CAUTION: READ BEFORE SIGNING

Date: _____

Please Print Name _____

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CAUTION: READ BEFORE SIGNING

Date: _____

Please Print Name _____

Soccer 2021 Parental Permission Form
Please leave in office or mail to
Immanuel Bible Church
1244 West Farms Road Howell NJ 07731

Soccer 2021 Parental Permission Form
Please leave in office or mail to
Immanuel Bible Church
1244 West Farms Road Howell NJ 07731

Name: _____

Grade: _____ D.O.B: _____ Sex: M / F

Shirt Size _____

Address _____

Phone Number: _____

Email _____

Allergies: _____

I give permission for my child _____ to participate in Soccer Camp at Immanuel Bible Church. I give permission for his/her photograph to be taken during the camp for promotional purposes. I absolve all counselors and volunteers involved with Immanuel Bible Church from responsibility for accident, incident, or injury which may occur over the duration of the camp during any aspect of the camp. I give permission to the adult(s) in charge to give medications to my child and to provide or get emergency medical treatment for my child, and I will be financially responsible for any such treatment. I also agree to pay for any damage made by my child if it is proven my child did so.

Parent's Signature _____

Parent's Name: (*please print*) _____

Emergency contact:
1) Name & Number _____

Name: _____

Grade: _____ D.O.B: _____ Sex: M / F

Shirt Size _____

Address _____

Phone Number: _____

Email _____

Allergies: _____

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Parent's Signature _____

Parent's Name: (*please print*) _____

Emergency contact:
1) Name & Number _____

2) Name & Number _____