




Old First Reformed  United Church of Christ
151 N. 4th Street (at Race Street), Philadelphia, PA 19106 · (215) 922-4566
www.oldfirstucc.org

Waiver & Release

All participants who participate in Old First and Wellspring programming must have a signed Waiver & Release Form, including adults 19 years and older. Participants under 19 must have the authorized signature of a Parent/Guardian. This form cannot be faxed or mailed to Old First office. It must be brought to registration.

Name of Organization: _____

Address: _____ City _____ State _____ Zip _____

NAME: _____ BIRTHDATE: ____/____/____

ADDRESS: _____ CITY _____ STATE _____ ZIP _____

EMAIL: _____

(Please fill our information if under Age 19)

PARENT/GUARDIAN _____

HOME PHONE: (____) _____ WORK/CELL PHONE _____

EMAIL: _____

Consideration. I acknowledge the personal benefits accruing to me (and my child, as applicable) by reason of participation in Old First’s/Wellspring program activities and am aware of the activities in which I, or my child, will be involved through said participation.

Release / Indemnification. I hereby, in consideration of such benefits and other good and valuable consideration received, consent to the above listed participation and release absolutely, forever discharge, hold harmless and covenant not to sue Old First United Church of Christ, and camp location , its directors, employees, agents, volunteers, and affiliates from any an all present or future liability, claims, demands, actions, or rights of action, whether asserted by me or a third party arising out of my (or my child’s) participation in camp activities (the “Claims”). I agree to indemnify and hold harmless Old First/Wellspring programming for any such Claims brought by me or a third party from any cost associated with defending or litigating such claims, including but not limited to attorney fees, costs, and legal expenses.

Assumption of Risk: I am aware of the risks associated with participation in the Old First/Wellspring programs and do hereby voluntarily assume full responsibility for any risk or loss, property damage or personal injury, including death, that may result from participation in event activities.

Medical Emergency: In the event of injury or medical emergency, I understand that the church’s group leader, not Old First staff/volunteers, will be responsible for the medical care of all attendees. It will be the church’s group leader’s responsibility to assess medical needs, obtain and consent to appropriate medical

care, transport person in need of medical care and contact parents or guardians of minors. I release Old First UCC from any and all liability related to medical treatment. In addition, I assume the risk and financial responsibility for any injury resulting from the attendee's participation in all Old First/Wellspring programming events.

Authorization Addendum—I acknowledge that during my (or my child's) participation in Old First/Wellspring programs that certain risks do exist. These include, but are not limited to, the hazards of being in a construction type setting, travel by automobile, the risks involved in leading recreation games and those existing because of consent of these programs. In consideration of this acknowledgement, I voluntarily have and do hereby, assume all risk associated with my (or my child's) participation in these programs.

Understanding. I represent and acknowledge that I have completely read and understand this document and all its term and all matters referred to herein, and I signed voluntarily as my free act and deed, that I have had ample opportunity to obtain the advice of counsel and that by signing this document, I understand that I am relinquishing legal rights and remedies that my have otherwise been available to me. I understand that this Waiver and Release shall be constructed as broadly and inclusively as is permitted by applicable law and agree that if any portion of this document is held invalid, the remaining shall continue in full force and effect. To the extent the restriction on filing lawsuits is deemed unlawful, I agree to submit any Claims to a Christian conciliation/.mediation organization for binding resolution.

Media Consent. I give my consent and permission for the taking of photographs and/or video of me (or my child) during the described programming and I waive and/or assign all rights (including copyright) in such media to Old First. Old First UCC, as the sole owners of such media, shall have the exclusive right to control and determine the use, display, performance, reproduction and dissemination of any such photographs and/or videos.

Copy to Old First UCC. It is understood and agreed that a copy of this form shall be treated as authentic and binding as the original and that a copy of the same shall be provided to any program of Old First UCC.

**CAUTION: READ THIS DOCUMENT CAREFULLY BEFORE SIGNING.
This is a general release and indemnification of claims.**

Please check which applies:

Parent/Guardian **Attendee 19 years of age or older**

Signature _____ **Date:** _____

If you are a Parent/Guardian of an attendee who is under 19 years of age, please include the following

Signature: _____ **Date:** _____

Relationship to attendee: _____

Contact number: _____