



RENAISSANCE CHURCH

**Renaissance Church
ASSUMPTION OF RISKS/AUTHORIZATION FORM
2011- 2012**

Consent by Self or Parent/Guardian of a Minor

PROPOSED ACTIVITY: _____

FIRST: I/We _____ and _____
(hereinafter referred to as "participant") are the adult natural parent(s) or legal guardian of
_____, a minor of _____ years of age.

SECOND: PARTICIPATION DISCLOSURES AND WAIVERS

Participant and Renaissance Church, Inc. (hereinafter referred to as Renaissance Church) understand and agree that there are a number of various programs undertaken by departments and groups in affiliation with Renaissance Church, on and off Renaissance Church campus facilities, involving activities and individuals that are often not under direct control or supervision of Renaissance Church, and that there is an overriding policy that each participant involved in these programs does so at their own risk of personal injury or damage of property; and, Participants desires to take part in the activity mentioned herein above, and fully understands and agrees that such activity might involve sporting activities, travel or contacts with other individuals or groups, and the Renaissance Church has limited or no control over other individuals involved in such activity; and that there is always the risk of physical injury, illness, and other loss, and possible costs or expenses for medical or dental diagnostic and curative treatments, and general and special damages for incidental loss or expense; and, in these premises, Participants does for himself/herself, and for and on behalf of said child(ren) and his or her family, representatives and heirs, assume the risk of all such injury, loss, expense and damages, to person or property, and does hereby wholly release Renaissance Church or its agents that might arise from or on account of any sort of loss or injury of or to person or property of any description in this regard, and as an inducement of Renaissance Church and its agents to allow the undersigned and such child(ren) to participate in such activity, does hereby agree to hold harmless Renaissance Church and its agents from all these things in event any such claim should arise. Renaissance Church does not act as an insurer, guardian, guarantor or warrantor or health or safety of anyone involved in such activity.

THIRD: DISCLOSURE OF SPECIAL MEDICAL OR OTHER REQUIREMENTS

The undersigned further represents that the minor child(ren) suffers from no disability or disease, and has no special requirements for cars, supervision or medication, other than those listed on the back.

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FOURTH: MEDICAL AUTHORIZATION

In event it should become necessary, whether in emergency or otherwise, where the said child(ren) cannot act for himself or herself, or parent or guardian cannot be contacted, consent is hereby given for Renaissance Church through its adult individuals serving as its agents to arrange for and consent to x-ray examination, anesthesia, medical or surgical diagnosis and/or treatment and hospital care, for said child (ren), on behalf of Participant; and, in such event, Participant agrees to assume and pay all costs, charges, fees, and expenses incurred in the premises, and to hold harmless Renaissance Church therefrom. Participant represents and agrees that he or she already has or will provide insurance coverage or payment of such things, at Participants own expense. Should said leader(s) or agent(s) exercise their authorization consent hereunder, upon the advice of a licensed physician, surgeon or dentist, I knowingly and voluntarily exonerate and release said leader(s) or agent(s) and Renaissance Church from any liability for this action.

FIFTH: DISCIPLINE

Participant for himself/herself/themselves and on behalf of such minor child(ren) hereby submits to and agrees to abide by all rules and regulations, supervision and discipline set and applied by Renaissance Church or its agents, and it is agreed that for violation of such rules and regulations, supervision or discipline, the participation in the activity may then be immediately terminated, without liability on Renaissance Church or its agents.

SIXTH: VIDEO

Participants and guardians agree to allowing themselves to be photographed or video taped for the purpose of future promotional materials.

DATED: _____

SIGNATURE: _____
(Parent/Legal Guardian) (Please PRINT Name Here)

SIGNATURE: _____
(Parent/Legal Guardian) (Please PRINT Name Here)

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By signing this form you agree to all conditions, rules, and their enforcement, at set forth by Renaissance Church.

Should your child be dismissed from the proposed activity, it is the responsibility of the parent/guardian to provide for their transportation.

Note:

While your child is in the care of the leaders of Renaissance Church, an emergency, illness or accident may occur which requires immediate medical or dental attention. In Civil Code §25.8 the California legislature has authorized consent in advance by parent or guardian for such treatment. Such consent serves to protect Renaissance Church, the leader(s), doctor(s), and yourself by assuring that prompt emergency treatment can be admitted.

Parent/Guardian

Home Phone # - Other Contact #

Address/Apt. #

City, State, Zip

Doctor

Phone #

Closest Relative or Contact (if parent can't be reached)

Phone #

Insurance Company

Policy Number

Present/Medications/List of Allergies

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