

Trip: \_\_\_\_\_  
Date of Event: \_\_\_\_\_ Participant \_\_\_\_\_

**Participant & Parent/Guardian Waiver & Indemnity Agreement  
Westminster Presbyterian Church**

**For Consideration by Participant:**

I desire to participate in this trip/event. I choose to abide by the rules set forth by the church and trip/event leaders, respect the rights of others and not exhibit unsafe and/or destructive behavior. I will not bring or use alcohol, illegal drugs or weapons of any kind. I agree that if I violate these rules, I am subject to early dismissal from the trip/event at the expense of my parent/guardian (who will be notified in such case.)

\_\_\_\_\_  
Initial - Participant

**For Consideration by Parents/Guardians & Non-Minors:**

I grant permission for the aforementioned participant to attend the names trip/event during the date of event under the care and authority of Westminster Presbyterian Church and the Evangelical Presbyterian Church denomination.

In consideration of your accepting the participant in the above named trip/event, I hereby, for myself, my heirs, executors, and administrators, waive and release any and all rights and claims for damages that I may have against the above named organizations and their agents, employees, representatives, successors and assigns for any and all injuries suffered by the participant that arise out of the named trip/event sponsored by Westminster Presbyterian Church.

I warrant that I have the right to authorize the foregoing and do hereby agree to hold Westminster Presbyterian Church harmless of and from any and all liability arising out of willful misconduct or gross negligence, of whatever nature, which may arise out of or result from such participation. For the consideration stated above, I further agree that in the event that my child (or the minor for whom I am the legal guardian) should make any claim against Westminster Presbyterian Church for damages arising out of the named trip/event, I will personally indemnify, defend, and hold harmless the organization and its agents, employees, representatives, successors and assigns against any and all loss and damage occasioned thereby, including attorney's fees.

I have read and understand this Agreement and I have willingly placed a signature below as evidence of my acceptance of all conditions contained herein. (If the participant is a minor, I also agree to pay for the cost to bring him/her home should the trip/event leadership deem that the participant has been in clear violation of the rules set forth.)

\_\_\_\_\_  
Initial – Parent or Guardian

## **Parent/Guardian Medical Treatment & Liability Release Form Westminster Presbyterian Church**

I understand that in the event medical intervention is needed, every attempt will be made to immediately contact the person(s) listed on this form. In the event I cannot be reached in an emergency during the activity dates of this trip/event, I hereby give my permission to the physician or dentist selected by designated trip leaders to hospitalize, to secure medical treatment and/or to order an injection, anesthesia, or surgery for my child as deemed necessary.

I understand that my insurance coverage for my child will be used as my coverage in the event medical intervention is needed.

I understand all reasonable safety precautions will be taken at all times by the Evangelical Presbyterian Church and its church leaders during the events, activities and work projects.

I understand the possibility of unforeseen hazards and know the inherent possibility of risk. I agree not to hold Westminster Presbyterian Church, its church leaders, employees or volunteer staff members liable for damages, losses, diseases, or injuries incurred by the subject of this form.

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Signature of Parent or Legal Guardian Date

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Signature of Other Parent (if holding joint custody) Date

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Signature of Participant Date

Home Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Work Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

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Additional Emergency Contact Name and Phone

**Westminster Presbyterian Church  
1200 Highway 15 North  
Laurel, MS 39440  
(601) 649-8033**