North Pointe Church Internship 2023 Release Form

Name of Participant:
Name of Minor Participant:
Name of Parents (or legal guardian) of Minor Participant:
Mother:
Father:
Guardian:

I, the undersigned adult participant and/or parent/legal guardian of the above named minor participant for myself and/or such minor, our heirs, personal representatives, assigns and next of kin, request permission to participate in the following event, organized and/or conducted by the **North Pointe Church, Inc.** which event shall include the use of the property, facilities, transportation and other services provided by or on behalf of the North Pointe Church, Inc. or third parties attendant with such event:

North Pointe Church Internship 2023

Collectively, such an event and the use of the property, facilities, transportation and other services provided by or on behalf of the North Pointe Church, Inc. or third parties attendant with such event shall be referred to as the "Activity".

In consideration for the North Pointe Church, Inc. to permit my and/or such minor's participation in such Activity, and intending to be legally bound,

- I, individually and on behalf of such minor, do hereby:
- 1. Agree to observe and obey and instruct such minor to observe and obey all written rules and warnings and any oral instructions or directions provided by the North Pointe Church, Inc., or the employees, representatives or agents of North Pointe Church, Inc.
- 2. Recognize that there are certain inherent risks associated with the Activity, including, without limitation, risks attendant with the interaction with other participants, travel and exposure to nature and the elements and for myself and/or on behalf of such minor assume full and complete responsibility for all risks including, but not limited to risks of i) serious personal injury or death to myself and/or such minor, and ii) serious damage to my property and/or the property of such minor.

- 3. Release North Pointe Church, Inc., its employees, agents, representatives, successors and assigns (collectively, "North Pointe Church, Inc.") of and from any and all liabilities, costs, obligations, causes of action, demands and/or claims of any nature whatsoever, whether arising at law or in equity, I and/or such minor may have or may hereafter have, against North Pointe Church, Inc. by reason of any matter, cause or action arising from the Activity and further to protect, defend, hold North Pointe Church, Inc., harmless and to indemnify North Pointe Church, Inc. against claims, damages and liabilities, including without limitation, reasonable attorney fees and costs, incurred by North Pointe Church, Inc. in connection with or arising out of my and/or such minor's participation in the Activity. This release and indemnification shall specifically survive the termination of the Activity and for any applicable statute of limitations periods under which a claim may be brought thereafter.
- 4. Represent that I have legal authority over and custody of such minor.
- 5. Understand the Activity may be conducted at some distance from available medical assistance. In case of illness or injury to such minor, I understand that reasonable effort will be made to contact me or any other designated parent/legal guardian of such minor and in case of a medical emergency, 911, if available, will be called. In the event that I or any other parent/legal guardian cannot be notified or are not available, I authorize North Pointe Church, Inc. designated Activity supervisor to provide first aid treatment and consent to appropriate additional medical treatment or attention as many be required by the circumstances, for such minor (and myself if I am participating in the Activity and unable to provide informed consent for myself), including without limitation, diagnostic tests, anesthetic and surgical procedures, admission to hospital care and such other medical treatment as determined to be reasonably necessary and appropriate by a licensed healthcare provider, including any first responder and/or physician. I understand that North Pointe Church, Inc. provides no insurance which will cover me or such minor in conjunction with the Activity or in conjunction with any provided medical care and I agree to be fully responsible for any medical treatment costs provided to me and/or such minor. I maintain accident and health insurance for myself and such minor.

MEDICAL INFORMATION: Please list all pertinent medical information (for example, allergies, medications, physical impairments, or any other information necessary for a healthcare). Explain fully:

Medical Information for Minor Participant:				

Medical Information for Adult Participant:			
and/or such minor's participation in the abo determined within the sole discretion of Nor refund any remitted fees or costs and ii) sha	rall have the right to unilaterally terminate my ove named Activity for cause, such cause to be rth Pointe Church, Inc. Activity Supervisor, without all reimburse North Pointe Church, Inc. for any o return me and/or such minor to the original point		
Inc., its agents, employees and representative but further acknowledge, it is not possible to such Activity and will instruct such minor to observe and obey all written rules and warn by North Pointe Church, Inc., or its employed being directly supervised. I further understain the Activity and shall at all times be responsible to supervision of such minor, should I choose to	ervision will be exercised by North Pointe Church, wes during such minor's participation in the Activity, o supervise such minor literally at all times during adhere to proper standards of conduct and to ings and any oral instructions or directions provided es, representatives or agents, especially when not and assume the risks inherent with participation ensible for myself during the Activity and the o attend the Activity, notwithstanding the fact eats, employees and representatives present at such		
X	X		
Signature of Adult Participant	Signature of Parent and/or Legal Guardian of Minor Participant		
X	X		
Printed Name of Adult Participant	Printed Name of Parent and/or Legal Guardian of Minor Participant		
ate: Date:			