Evangel Christian School
LIABILITY RELEASE FORM
(Release Of All Claims)

In consideration for being accepted by **Evangel Christian School/Fountain of Life Church of the Assemblies of God** for participation in **Summer Day Camp Activities June 4-July 27, 2018.** I do hereby release, forever discharge and agree to hold harmless Evangel Christian School/Fountain of Life Church of the Assemblies of God and the directors thereof from any and all liability, claims or demands for personal injury, sickness, or death, as well as property damage and expenses, of any nature whatsoever which may be incurred by the undersigned and the participants that occur while said person is participating in the above described trip or activity including recreation and work activities. The undersigned further hereby agrees to hold harmless and indemnify said school/church, its directors, employees and agents from all liability sustained by said acts of said participants, including expenses incurred attendant thereto.

The undersigned further consents to the administration of first aid and/or doctor's care, or any form of medical treatment necessitated by illness or injury that may require the same. In the event of the necessity of such care or treatment as heretofore described, the undersigned agrees to hold harmless and indemnify said school/church, its directors, employees and agents from any acts of malfeasance, and/or failure to act on the part of those chosen to administer medical care on behalf of the participant.

Participant_____

Parent/Guardian Signature_____

Participants Insurance Company_____

Signed this _____day of _____, 20____.

Policy Number_____

Home Telephone_____ Cellular Phone_____

Work Telephone_____ _____
Mother Father

Additional Emergency Contact_____

_____

Fountain of Life Church/Evangel Christian School
1277 Jubilee Drive
Saraland, AL 36571
(251) 675-4619