

Bethel Baptist Church

Youth Conference | College Days

Activity Waiver Form

Date: _____

Date of Birth: _____

Attendee Full Legal Name: _____



Activity Liability Waiver: Please Read and Sign Below

1. The activity participant named above hereby stipulates that he/she is physically sound and that he/she has approval to proceed with a routine of exercise and/or participate in all activities.
2. It is further expressly agreed that all activities shall be undertaken by me at my sole risk and that Bethel Baptist Church, Tri-State Baptist College and staff shall not be liable to me for claims, demands, injuries, damages, actions or causes of action, whatsoever, to my person or property arising out of or connected with the use by me of the services and activities provided or the premises where the same is located.
3. I do hereby expressly forever release and discharge from all such claims, demands, injuries, damages, actions or causes of action, from all acts of active or passive negligence on the part of Bethel Baptist Church, Tri-State Baptist College and staff.
4. Finally, I expressly agree that I will not use equipment improperly. If I have any questions whatsoever, concerning activity or exercise, I agree that I will request instruction from Bethel Baptist Church and Tri-State Baptist College staff.
5. In the event that I cannot be reached at the phone number provided, I grant Bethel Baptist Church permission to act on my behalf for this child (dependent) should medical attention be needed.
6. I will not hold Bethel Baptist Church responsible for any injury or illness, including but not limited to COVID-19 or any of its variants, that could occur or be contracted during activities.

Parent/Guardian Printed Name

Parent/Guardian Signature

Date

Phone Number

Email