



St. Louis Christian College
Submerge Event – Photo Release, Liability & Medical Release Form
September 23-24, 2016

Make a copy for yourself and bring the ORIGINAL to registration.

Please check which one best describes your participation:

☐ Sponsor ☐ Student ☐ Youth Minister

Participant Name (*Please Print*) _____

Circle: Male Female Age (if under 18) _____ Grade (year in school) FR SO JR SR

Address _____ City _____ ST _____ Zip _____

Participant's Email: _____ Home Phone _____

Church with whom you are attending _____ City/State _____

Group Leader's Name _____

Health Insurance Company _____ Policy Number _____

Known Allergies and Reactions _____ Medications Currently Taking _____

Emergency Contact Info of Parents/Legal Guardian:

Name of Parent/Legal Guardian: _____ Cell Phone _____

Person to notify if parent/legal guardian cannot be reached:

Name: _____ Relationship _____ Phone: _____

I, the participant or for those under 18 the parent or legal guardian of the participant listed on this form, certify that he/she has my full approval to participate in this St. Louis Christian College event, *Submerge*.

The individual identified on this form understands that all participants are required to abide by the Program rules and be directly responsible to the St. Louis Christian College Submerge Team.

The St. Louis Christian College Submerge Team assumes responsibility for discipline at the Program and, if necessary, may, because of misconduct or disobedience, require a participant to leave. In such instance, I will assume full responsibility for returning the participant home.

Further, I hereby release, forever discharge and agree to hold harmless a) St. Louis Christian College and its directors, officers, employees, agents and all other persons or entities acting on their behalf (the "Covered Parties") and b) the lessor/owner of properties on which Submerge is held, from any and all liability, claims, or demands for personal injury, sickness or death, as well as property damages and expenses, of any nature whatsoever which may be incurred by the participant, the undersigned, and/or any member of the participant's family by reason of participating in any activities associated with St. Louis Christian College's Submerge Program whether or not such claims, actions, demands, liability, costs or expenses are caused by the negligence or omission of any of the Covered Parties.

It is my intention to, and I do hereby surrender and waive any rights to sue or exercise any legal right to seek damages from the Covered Parties from their failure to use reasonable care in any way.

Further, I do authorize my church leader, or any St. Louis Christian College staff to take the participant to a doctor or hospital and I hereby authorize medical treatment, including by not limited to emergency surgery or medical treatment, and I hereby assume financial responsibility for all expenses incurred for such treatment and, if necessary, all expenses to return the participant home.



Further, I hereby assume all risk of personal injury, sickness, death, damage and expense as a result of the participation in this St. Louis Christian College Submerge Program.

I hereby release and agree to hold harmless and indemnify the Covered Parties, for any liability and/or expense sustained as the result of negligent, willful or intentional acts of the participant, including damages to the Program facility.

For valuable consideration received, I hereby irrevocably grant to St. Louis Christian College the worldwide, royalty-free, right to use the participant's name, voice, likeness, and image in all forms and media, and in all manners for any lawful purposes, commercial or noncommercial. I understand that my participation makes me eligible to receive educational information and updates regarding ministry successes and opportunities.

I acknowledge this agreement is intended to be as broad and inclusive as permitted by the laws of the state of Missouri and that if any portion hereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. I further agree this agreement will be governed by and construed in accordance with the laws of the State of Missouri without giving effect to the principles of conflict of law and the courts within Missouri will be the only courts of competent jurisdiction. I hereby irrevocably submit to the personal jurisdiction of the courts of St. Louis County, Missouri.

I hereby certify that I have carefully read the foregoing and acknowledge that I understand and agree to all of the above terms and conditions. I am aware that by signing this agreement I assume all risks and waive and release certain substantial rights that I may have or possess against St. Louis Christian College or any of the covered parties.

Signature of Participant Named Above: _____

(If under 18 parent or legal guardian must sign)

Printed Name of Parent/Legal Guardian _____ Date _____

Signature of the Parent/Legal Guardian _____ Date _____

