## **Markle Student Ministry Event Waiver**

Student Name:			
Person To Notify In The Event Of An Emergency:			
Emergency Cell Phone:			
I acknowledge that participation in activities with the Markle Student Minithe Participant (and to Participant's parents or guardians, if Participant is result in various types of injury including, but not limited to, the following: injury, death, emotional injury, personal injury, property damage and finance.	a minor) sicknes	, and n s, bodi	nay
In consideration for the opportunity to participate in the activities with the Ministry, the Participant (or parent/guardian if Participant is a minor) ackn accepts the risks of injury associated with participation in and transportal Activity. The Participant (or parent/guardian) accepts personal financial reinjury or other loss sustained during the Activity or during transportation tractivity as well as for any medical treatment rendered to the Participant of the Sponsor or its agents, employees, volunteers, or any other representative referred to hereinafter as the "Activity Sponsor"). Further, the Participant of releases and promises to indemnify, defend, and hold harmless the Activity injury arising directly or indirectly out of the described Activity or transport Activity, whether such injury arises out of the negligence of the Activity Spontal Participant, or otherwise.	owledge tion to an esponsible o and from the auties (con parenty Sponstation to	s and fron lity for the horize bllective t/guard and from the sor for and from the sor for for the sor for for the sor for for the sor for	n the any d by ely dian) any
If a dispute over this agreement or any claim for damages arises, the Part guardian) agrees to resolve the matter through a mutually acceptable alteresolution process. If the Participant (or parent/guardian) and the Activity upon such a process, the dispute will be submitted to a three-member arresolution pursuant to the rules of the American Arbitration Association.	rnative o	lispute canno	e ot agree
Covid-19 Waiver Addition: I acknowledge that participation in Markle Student Ministry activities presinherent risks regarding any potential and/or actual infection of Covid-19 illness, the result of which may be both minor or serious. By signing below parent/guardians, if participant is a minor) are responsible for evaluating the may face and assumes all risk and is responsible for his or her actions. Perecognize, understand, and agree that the Markle Student Ministry assume for any liability, damage, or injury relating to or resulting from Covid-19.	and/or a w, the pa he risks articipan	ny rela rticipa that he ts furth	ated Int (or e or she ner
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:			