

FAMILY LIFE CHURCH (aka First Assembly of God of Hermitage)

STUDENTS 13-17 YEARS OLD - VOLUNTEER LIABILITY RELEASE

PLEASE PRINT CLEARLY

TODAY'S DATE:

<i>FIRST NAME</i>	<i>MIDDLE NAME</i>	<i>LAST NAME</i>
<i>SUFFIX (Sr. Jr. II, III, IV, etc.)</i>	<i>MAIDEN NAME</i>	<i>OTHER / AKA NAME</i>
<i>EMAIL ADDRESS (please print clearly)</i>		
<i>SOCIAL SECURITY #</i>	<i>DATE OF BIRTH</i>	<i>SEX (Circle one please)</i> Male Female
<i>STREET ADDRESS</i>	<i>APT#</i>	<i>RACE (circle only 1 please)</i> White Asian Black American Indian
<i>CITY, STATE</i>	<i>ZIPCODE</i>	<i>PHONE#</i>
<i>Do you have a felony record? Yes No If yes, please explain briefly:</i> <small>(Note: child abuse, neglect, etc. automatically cannot be a volunteer)</small>		

<i>PLEASE DESCRIBE YOUR RELATIONSHIP WITH JESUS...</i>	
<i>HOW LONG HAVE YOU ATTENDED FAMILY LIFE CHURCH aka FIRST ASSEMBLY OF GOD?</i>	<i>NAME OF OTHER CHURCHES YOU HAVE ATTENDED REGULARLY DURING THE LAST 5 YEARS:</i>
<i>IF FLC SPORTS VOLUNTEER ONLY; YOUR HOME CHURCH:</i>	
<i>LIST ANY GIFTS, CALLINGS, TRAINING, EDUCATION, OR OTHER FACTORS THAT HAVE PREPARED YOU FOR CHILDREN/YOUTH WORK:</i>	
<i>LIST ALL PREVIOUS CHURCH WORK INVOLVING CHILDREN/YOUTH (IDENTIFY CHURCH/TYPE OF WORK):</i>	
<i>HAVE YOU ANY PHYSICAL HANDICAPS OR CONDITIONS PREVENTING YOU FROM PERFORMING CERTAIN TYPES OF ACTIVITIES RELATING TO YOUTH OR CHILDREN WORK?</i>	

PARENT(S) / GUARDIAN(S) INFORMATION

<i>NAME</i>	<i>NAME</i>
<i>EMAIL</i>	<i>EMAIL</i>
<i>PHONE</i>	<i>PHONE</i>

PARENTAL STATEMENT and RELEASE OF LIABILITY

Have you (Applicant) ever:

Yes **No** *Been the subject/victim of any child abuse or sexual misconduct investigation by any employer, State licensing agency, law enforcement agency, or the Department of Children and Families (*unless the investigation resulted in a finding that the allegations were false or the alleged incident of child abuse or sexual misconduct was not substantiated)?*

AUTHORIZATION AND RELEASE OF LIABILITY

I understand that as a volunteer is participation with a nonprofit Christian ministry program and that mine or my child's participation is voluntary and not essential to completion of requirements of any program, school or government agency.

I further understand and agree that mine or my child's participation in serving at FLC involves the risk of injury and even death from various causes, including but not limited to accidents, falls, strenuous and prolonged physical activity, dehydration, illness, collision or dispute with other participants, weather related injuries, playing area and equipment defects, and negligence of coaches and referees. On behalf of my child, I assume these risks. In consideration of the privilege of my child serving at FLC, and on behalf of my child and me as parent/guardian, I hereby release, discharge, hold harmless and indemnify, and covenant not to sue, the FLC and all of the FLC directors, officers, elders, trustees, deacons, employees, volunteers, insurers, agents and representatives, any and all other persons associated with the FLC (including without limitation any other participating churches, sponsors, parents, vendors, coaches and other game and event workers, officials, drivers, and organizations) as to any and all claims of my child, me and other family members for personal injuries suffered by me, my child, property damage, medical expenses, and economic loss arising directly or indirectly out of mine or my child's participation and any first aid, medical care or treatment provided to me or my child in the event I or my child is injured or becomes ill while participating in activities, and excepting claims that may not be released under applicable law.

IMAGES and/or VIDEO

This Release of Liability shall be as broadly construed as allowed by law to include all claims and rights that the participant; myself or child, that I as parent/guardian, and that other family members may have. I am a legally responsible parent or guardian of my child. If any provision of this Release of Liability is deemed invalid, the remaining provisions shall remain in full force and effect. This Release of Liability shall be binding on me, my family, heirs, next of kin, legal representatives, beneficiaries, successors and assigns I hereby authorize the FLC to use, reproduce, distribute, display, and to license others to use, reproduce, distribute, and display, mine or my child's image, and photograph, as well as any video, digital, or audio recording or reproduction, in connection with external and internal communications of the FLC for the sole purpose of advancing FLC programs .

I agree that a facsimile ("fax"), electronic or photographic copy of this Authorization shall be as valid as the original.

SIGNATURE: _____ **DATE:** _____