



## WAIVER & RELEASE FORM

All participants in Servant Life and Urban Nations Outreach events must have a signed and notarized Waiver & Release Form, including adults 18 and older. Participants under 18 must have the authorized signature of a Parent/Guardian who is able to give consent to travel. This form cannot be faxed. It must be mailed to the Servant Life office. Servant Life reserves the right to deny participation in any or all of its short-term mission trips. Each team member must be at least fourteen years of age (sixteen if going as an individual) by the first date of the trip unless otherwise approved by Servant Life.

### Personal Information

Church Name: \_\_\_\_\_ City/State: \_\_\_\_\_

Group Leader name (*if applicable*): \_\_\_\_\_

Participant Full Name (as it would appear on ID): \_\_\_\_\_

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Age (as of the first date of the trip): \_\_\_\_\_

Gender:  Male  Female

T-Shirt Size:  Small  Medium  Large  XL  2X  3X

Role on Trip:  Group Leader  Adult  Student

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_

Home Phone:( ) \_\_\_\_\_ Work/Cell Phone( ) \_\_\_\_\_

Email: \_\_\_\_\_

Emergency contact (not going on trip): \_\_\_\_\_

Relationship to Participant: \_\_\_\_\_

Main Phone:( ) \_\_\_\_\_ Work/Cell Phone( ) \_\_\_\_\_

Email: \_\_\_\_\_

**Release / Indemnification.** I hereby, in consideration of such benefits and other good and valuable consideration received, consent to the above listed participation and release absolutely, forever discharge, hold harmless and covenant not to Urban Nations Outreach and/or Servant Life, Inc., or any of either entities' successors, affiliates, directors, employees, agents or volunteers ("Servant Life") from any and all present or future liability, claims, demands, actions, or rights of action, whether asserted by me or a third party arising out of my (or my child's) participation in any event activities described herein (the "Claims"). I agree to indemnify Servant Life and/ or Urban Nations Outreach for any such Claims brought by me or a third party from any costs associated with defending or litigating such claims, including but not limited to attorney fees, costs and legal expenses.

**Consent to Travel.** In the case of the above listed participant being a minor, I hereby give consent for the participant to travel to Puerto Rico. By signing this form, I confirm that I have legal custody of the child or the rights to confirm their participation in this trip.

**Medical Emergency.** In the event of injury or a medical emergency, I have authorized the treatment described in the Emergency Authorization portion of the Servant Life Medical Release or my group's own medical release forms. I release Servant Life and Urban Nations Outreach from any and all liability related to decisions made by any individual authorized under said form regarding medical treatment or for any medical treatment received or declined. In addition, I assume the risk and financial responsibility for any injury resulting from my (or my child's) participation in the described event.

**Other Unexpected Events.** In the event of an unexpected occurrence, including but not limited to detainment by local government, mandatory quarantine, natural disasters, localized issues, national security threats, acts of terror, national or global pandemics, widespread fear and terror, or other circumstances, I assume full responsibility for any risk of loss, financial expense, property damage, or personal injury, including death, that may result from participation in event activities. In the event that such occurrences extend the length of my trip beyond the planned dates, I understand that I am responsible for any additional financial expenses or obligations, and that Servant Life and NAMB may be able to assist me but might require additional financial compensation in order to do so.

**Assumption of Risk.** I acknowledge that during my (or my child's) participation in the described event that certain risks do exist. These include, but are not limited to, the hazards of being in a construction type setting, travel by automobile, traveling to and residing in a foreign context, the risks involved in leading recreation games and those existing because of the content of these programs, as well as everything listed in "Other Unexpected Events" above. I am aware of the risks associated with participation in the above event and do hereby voluntarily assume full responsibility for any risk of loss, financial expense, property damage, or personal injury, including death, that may result from participation in event activities.

**Travel Documents.** I understand and acknowledge that it is my personal responsibility to obtain the necessary documents for entry into any foreign country, including but not limited to visas and passports, and to seek medical advice regarding any specialized treatment or pretreatment, medication or immunization that may be personally required for travel with Servant Life and Urban Nations Outreach..

**Consideration.** I acknowledge the personal benefits accruing to me (and my child, as applicable) by reason of participation in the above described event and am aware of the activities in which I, or my child will be involved through said participation. I further acknowledge that the execution of this Agreement allows Servant Life, Inc. (defined below) to provide the described event at a reduced financial cost, directly benefiting Servant Life, Inc. and thereby furthering my objective to benefit Servant Life, Inc. and further its mission.

**Extraction.** The policy of Servant Life and Urban Nations Outreach is that it will not pay ransom or yield to demands of any individual or group. In the event of an arrest or detention by legitimate governments or other forces, the Organization will do everything within its power and resources to gain release. In the event of threats to the life, the Organization shall use legitimate, prudent means, including evacuation, if necessary, for safeguarding life. If, for whatever reason, I am individually or in a group, involved in kidnapping, piracy, or hijacking, I hereby agree to allow Servant Life and Urban Nations Outreach or their delegate to represent me and my family in any negotiation proceedings. I understand and agree to abide by Servant Life and Urban Nations Outreach' policy.

**Media Consent.** I give my consent and permission for the taking of photographs and/or video of me (or my child) during the described event and waive and/or assign any and all rights (including copyright) in such media to Servant Life and Urban Nations Outreach. Servant Life and Urban Nations Outreach, as the sole owners of such media, shall have the exclusive right to control and determine the use, display, performance, reproduction and dissemination of any such photographs and/or videos.

**Code of Conduct.** Servant Life, partnered with Urban Nations Outreach, is a Christ-centered, evangelical organization committed to Helping People Go and Make Disciples of All Nations through partnership with existing ministries within developing countries. By participating on a Servant Life/Urban Nations Outreach trip, I understand that I am perceived as a representative of Servant Life and Urban Nations Outreach whether as a sponsor/donor/partner or guest, and agree to conduct myself according to Christian principles in the context of the local culture of the destination country. I agree to defer to and uphold standards communicated by trip leaders regarding specific behaviors which may be considered offensive or inappropriate in the local Christian context. I understand and agree that any behavior which puts the long-term ministry of these parties at risk may result in trip dismissal at my expense. I additionally agree to adhere to Servant Life and Urban Nations Outreach' travel safety standards as communicated by trip leaders.

**Understanding.** I represent and acknowledge that I have completely read and understand this document and all its terms, that I have had an ample opportunity to obtain the advice of counsel and that by signing this document, I understand that I am relinquishing legal rights and remedies that may have otherwise been available to me. I understand that this Waiver and Release shall be construed as broadly and inclusively as is permitted by applicable law and agree that if any portion of this document is held invalid, the remaining shall continue in full force and effect. To the extent the restriction on filing lawsuits is deemed unlawful, I agree to submit any Claims to a Christian conciliation/mediation organization for binding resolution.

**CAUTION: READ THIS DOCUMENT CAREFULLY BEFORE SIGNING. THIS IS A GENERAL RELEASE AND INDEMNIFICATION OF CLAIMS, AS WELL AS CONSENT TO TRAVEL.**

Please check, which applies:

- Participant over 18 years of age
- Parent / Legal Guardian

**If you are the participant listed in this form and are over 18 years of age, sign here:**

Signature: \_\_\_\_\_

**If you are a parent / guardian giving consent to travel, please read and sign below:**

In cases where **another parent also has custody**, or any situation in which you do not have full authority to give consent to travel, we require an additional signature from the other party who also has custody, either in this document or a separately signed and notarized document (such as a Minor Consent to Travel form).

**Parent / Legal Guardian #1**

**Parent / Legal Guardian #2, if needed**

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

Relationship to attendee: \_\_\_\_\_

Relationship to attendee: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Contact Number: \_\_\_\_\_

**NOTARY INFORMATION**

The following to be completed by the notary witnessing parent/guardian and/or participant's signature.

The State of \_\_\_\_\_ the County of \_\_\_\_\_.

Before me, a Notary Public, on this day personally appeared \_\_\_\_\_, known to me (or proved to me on the oath of \_\_\_\_\_) to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he executed the same for the purpose and consideration therein expressed.

Given under my hand and the seal of the office this \_\_\_\_ day of \_\_\_\_\_, A.D. \_\_\_\_\_.

\_\_\_\_\_  
Notary Public, Signature

My commission expires the \_\_\_\_ day of \_\_\_\_\_, A.D. \_\_\_\_\_.