



I (We), _____, the parent(s) (or legal guardian(s) of _____, a minor, in consideration of the agreement by the CrossBridge Church of Christ ("Church") hereby release my (our) child to participate in church related activities or trips, to take place from February 17, 2017 to February 16, 2018, do protect and hold harmless the Church, its officers, board members, elders, ministers, supervisors, agents, servants on any trips from any claim or liability whatsoever, including, but not limited to, personal injury, property damage, court attorney's fees and interest, however caused, as a result of my (our) child participating in the trip or activity.

I (We) further agree that the Church, its officers, board members, elders, ministers, supervisors, agents, servants, employees, any persons or organizations volunteering services without charge to supervise or chaperone reserve the right to terminate the participation of the above child for failure to behave and act in accordance with the Church's regulations on conduct, for failure to follow instructions and directions of the supervisor(s) and/or chaperones, or for any acts of conduct of the above child deemed by said officers, agents, and/or employees, to be detrimental to or incompatible with the interest, harmony, comfort or welfare of the group or ministry as a whole. If the participation of the above child is terminated, only the funds not actually used will be refunded, and the child will be sent home at my (our) expense.

II. LIMITED POWER OF ATTORNEY

If I (we) cannot be immediately contacted, we grant full power of attorney to the official representative or chaperone in the event of accident or illness of the above child at any time from the commencement to the termination of the trip, to do as such;

Charge for the transportation of my child, whether by ambulance or otherwise, to a proper facility where emergency treatment would normally be administered, including, but not limited to, an emergency room of a hospital, a doctor's office, or a clinic; and

Any releases as may be required in order to obtain any medical or surgical treatment as is required by the medical authorities at the facility; and

Perform every act necessary and proper to be done in the exercise of any of the foregoing powers as fully as I (we) might personally present, with full power of substitution and revocation hereby ratifying and confirming all that my (our) said authority shall lawfully do or cause to be done by virtue hereof.

I (we) further aver that I (we) have disclosed all known medical conditions, allergies, hyper sensitivities, illnesses (otherwise) and other medical information to my (our) said attorney(s) pertaining to said child.

Parent/Legal Guardian

Parent/Legal Guardian