

**HOUSEBOAT/WAKEBOARD TRIP
CALVARY BIBLE CHURCH PERMISSION SLIP, LIABILITY RELEASE,
MEDICAL RELEASE, AND MEDIATION AND ARBITRATION AGREEMENT
PLEASE READ CAREFULLY BEFORE SIGNING**

Participant's name (please print): _____ Birth Date: _____

Allergies: _____

Medical conditions (e.g., asthma, diabetes, hemophilia, epilepsy, allergies, etc.): _____

Medications Instructions _____ Type _____ Dosage _____

Health Insurance Co.: _____ Doctor _____ Phone _____

Policy No.: _____ Group/ID No.: _____

Parent/guardian's name (if participant is a minor): _____

Home phone: _____ Work phone: _____

I expressly consent to the participant's involvement in the **Houseboat/Wakeboard Trip**, scheduled to take place on June 26-28, 2009. The participant agrees to comply with all rules and policies for this activity.

I consent to my child/my traveling in a bus, car, or van, etc. to Englebright Lake. I understand and agree that the vehicle in which he/she/they/I may be traveling may not be owned by Calvary Bible Church. I am familiar with the dangers associated with vehicular transportation and understand that accidents are common. I also understand that the consequences of vehicular collisions include serious injuries, which may be permanent and can even result in death.

I also understand that during the trip my child/I may be participating in water sports, including but not limited to: wakeboarding, skiing, tubing, knee boarding, riding in boats, jumping off houseboats and rocks, swimming, canoeing, etc. I understand there will be a broad spectrum of recreational activities. I understand that there is a risk of boating accidents and drowning. I understand my child/I may crash into debris in the water resulting in various injuries. I understand that such activities involve inherent and other risks of **INJURY and DEATH**.

I understand that participation in each activity and event involves inherent and other risks of **INJURY and DEATH**. In consideration for the participant/my being permitted to be involved in the activities and events during the calendar year 2008, **I AGREE TO RELEASE CALVARY BIBLE CHURCH** and its pastors, elders, officers, staff, employees, volunteer workers, attorneys, agents, representatives, affiliates, successors-in-interest, and assigns (collectively "PROVIDERS") **from all liability, in excess of the applicable limits of any insurance providing coverage to PROVIDERS, for injury, death, and property loss and damage that arises out of or results from the activities and events, including all liability which results from the NEGLIGENCE of PROVIDERS, or any other person or cause.**

I authorize any person connected with **CALVARY BIBLE CHURCH**, or any activity or event, to administer first aid to the participant/me, as they deem necessary. I authorize medical and surgical care and transportation to a medical facility or hospital for treatment necessary for the participant's/my well-being, at my expense. I authorize the supervisors in the youth department to carry out any discipline deemed necessary for my child/me. I also agree, if necessary, that I will pay the expenses of my youth/me being sent home because of a disciplinary action.

I agree to submit any claim or dispute that arises out of, or results from any activity or event or this agreement to mediation and, if mediation is not successful, to legally binding arbitration. The mediation and legally binding arbitration will be conducted in accordance with the *Rules of Procedure for Christian Conciliation* of the Institute for Christian Conciliation. Judgment upon an arbitration award may be entered in any court otherwise having jurisdiction.

This agreement is binding upon the participant's heirs, executors, administrators, and assigns. I acknowledge this agreement is governed by the applicable laws of the State of California. If any provision of this agreement is held in

whole or in part to be unenforceable for any reason, the remainder of that provision and of the entire agreement will be severable and remain in effect.

I HAVE READ, UNDERSTAND, AND VOLUNTARILY AGREE TO THIS LIABILITY RELEASE, MEDICAL RELEASE, AND MEDIATION AND ARBITRATION AGREEMENT.

Participant's Signature: _____ Date: _____

Parent/Guardian: If participant is a minor, I verify that I am the parent or guardian of the minor, and I have authority to enter into this agreement on behalf of the participant.

Parent/Guardian's Signature: _____ Date: _____