

MISSION TRIP RELEASE

I, _____, acknowledge that I have voluntarily applied to participate in short-term mission trip to _____. I am fully aware that this mission trip and any future mission trips that I may take with Journey Community Church may expose me to unique hazards such as sickness, disease, dangerous environments, crime, political instability, governmental opposition, personal injury, death, as well as other risks. I am voluntarily participating in this mission trip and any future mission trips with the knowledge of the risks involved. I expressly warrant that I am capable of withstanding both the physical and mental demands of these activities.

I, _____, release and forever discharge Journey Community Church, and any other ministry/organization involved and each of the respective members, employees, officers, directors, and representatives from any and all claims for any and all injuries, illnesses, losses or damages I might have on or in any way relating to such mission trip(s), including without limitation, those relating to me leaving the United States of America and the modes of travel to do so. I hereby irrevocably and unconditionally release, waive, discharge and covenant not to sue Journey Community Church or any partnering church, or any of their affiliates, subsidiaries, divisions, members, directors, officers, employees, volunteers, partners and agents (collectively referred to as the "Releasees") for and from all claims of any nature now or hereafter existing whether known or unknown, including but not limited to all liability, on account of death, injury, or damage resulting from the negligence or other acts however caused, of the Releasees as a result of my participation in such mission trip(s).

I UNDERSTAND THAT I AM GIVING UP MY LEGAL RIGHTS AND THE RIGHTS OF MY REPRESENTATIVES/HEIRS TO RECOVER FOR INJURY, DEATH, OR PROPERTY DAMAGE.

I, _____, give Journey Community Church and its representatives with me on such mission trip(s) authority to request and authorize medical and/or hospital treatment for my benefit in the event of an injury or sickness sustained by me while on such mission trip(s), including but not limited to circumstances arising while traveling to and from the destination of such mission trip(s). I agree to pay for all such treatment and to reimburse Journey Community Church for all costs and expenses incurred by it with respect to such treatment.

I have carefully read this agreement and fully understand its contents. I am aware that this is a release of liability and a contract between myself and Journey Community Church and/or their affiliates. No oral representations, statements, or inducements apart from this agreement have been made to me.

I SIGN THIS AGREEMENT ON MY OWN FREE WILL.

18 YEARS OR OLDER:

Signature of Participant

Printed Name

Date

YOUNGER THAN 18 YEARS:

Signature of Minor's Guardian

Printed Name

Date

Emergency Contact: _____

Relationship to you: _____

Phone #: _____

Email: _____

Please list all prescription medications and dosing instructions that you are currently taking. All medications that you are taking on the trip must be in medication bottles with prescription labels.

Please list any known allergies to food or medications:

Please list any prior or current medical conditions/issues:
