



STUDENTS

RELEASE AGREEMENT

WHEREAS, the undersigned has requested the use of services, equipment or facilities belonging to or under the auspices of the TDF Youth Group, or the ministries of The Donelson Fellowship, and to engage in activities for the exclusive benefit of the undersigned; and

WHEREAS, the undersigned agrees to do so at his/her own risk and recognizing the possible and inherent danger to his/her person or property resulting there from; and

WHEREAS, The Donelson Fellowship and Youth Group does not wish to be liable for any damages arising from personal injury or property damage sustained thereby;

NOW, THEREFORE, in consideration of the mutual promises and other good and valuable consideration, the undersigned does hereby for himself/herself, his/her heirs, executor, employers, successors or administrators, and personal representatives:

- A. Assume full responsibility for any personal injury or any damage to his/her personal property which may occur, directly or indirectly, to include possible bodily injury, or death as a result of participation in any and all activities during the school year of 2017 and all trips that accompany the particular session including transportation to and from the activities.
- B. Fully and forever release and discharge The Donelson Fellowship and Youth Group, its sponsors, volunteers, and employees, from any and all claims, demands, damages, rights of action, or causes of action, present or future, whether the same be known, anticipated or unanticipated, resulting from or arising out of the above described activity.
- C. Understand that intentions and plans, at times, must change on the activity for the best of the group. And will give full consideration and authority for the Pastor, Youth Pastor, or student leaders to make these decisions for the safety or logistics of the group, trip, or activity.
- D. Agree that it is the intent of the undersigned that this RELEASE AGREEMENT shall be in full force and effect any time after the execution hereof.

Name of Event/Activity: _____

Name of Student: _____

Emergency Contact Person: _____

Emergency Contact Number: _____

Signature of Parent or legal guardian: _____

Date: _____