



VBS 2024 WAIVER AND RELEASE FORM

I hereby agree that participation in any and all activities or groups shall be at my sole risk.

I accept full responsibility for all risks and hazards inherent with my participation, including my transportation to and from the activity/group as well as during the activity/group itself.

I agree to waive, discharge claims, and release from liability **CAPEFAITH CHURCH**, its officers, directors, employees, agents, and leaders from any and all liability on account of, or in any way resulting from injuries and damages to the fullest extent allowed by law.

In addition, I agree to hold harmless **CAPEFAITH CHURCH**, its officers, directors, employees, agents, and leaders from any claims, damages, injuries or losses caused by my own negligence while a participant in the activity/group.

Each party further agrees that it shall be responsible for its own acts and results thereof to the extent authorized by law, and shall not be responsible for the acts of the other party and the results thereof.

AGREEMENT

I represent and acknowledge that I have read this waiver and release of liability entirely, and fully understand each and every provision. I am agreeing to this agreement freely and voluntarily assume all risks of such injuries and damages and, notwithstanding such risks, I agree to participate in the activity/group.

PARENT NAME

SIGNATURE

CHILD NAME

DATE

CHILD NAME

DATE

CHILD NAME

DATE

CHILD NAME

DATE
