

LIABILITY RELEASE FORM

In consideration for being accepted by **South Bay Faith Academy, Inc.** for participation in all school/family field trips and activities that take place off campus, we (I), being 21 years of age or older, do for ourselves (myself) (and for and on behalf of my child-participant if said child is not 21 years of age or older) do hereby release, forever discharge and agree to hold harmless **South Bay Faith Academy, Inc.** and the directors, employees and agents thereof from any and all liability, claims or demands for personal injury, sickness, death, personal or property damage and attorneys fees and/or expenses, for any nature whatsoever, no matter the cause, which may be incurred by the undersigned and the child-participant that occur while said child is participating in the above-described trip or activity. **It is understood and agreed that South Bay Faith Academy, Inc. is not covered by insurance for all school/family field trips that are off campus. All responsibility lies with the undersigned and/or the child participant.**

Furthermore, we (I) (and on behalf of our (my) child-participant if under the age of 21 years) hereby assume all risk of personal injury, sickness, death, personal or property damage and attorneys fees and/or expenses, as a result of participation in recreation and work activities involved therein.

The undersigned further hereby agree to hold harmless and indemnify said academy, its directors, employees and agents, for any liability sustained by said academy as the result of the negligent, willful or intentional acts of said participant, including expenses incurred attendant thereto.

Further, should it be necessary for the participant to return home due to medical reasons, disciplinary action or otherwise, we (I) hereby assume all transportation costs.

(If under 21 years of age, both parents must sign unless parents are separated or divorced in which case the custodial parent must sign)

(Type or print name of child/participant)

(Type or print name of child/participant)

(Type or print name of child/participant)

(Type or print name of child/participant)

(Type or print name of child/participant)

(Type or print name of child/participant)

(Type or print name of child/participant)

(Type or print name of child/participant)

AUTHORIZED SIGNATURES

Signature of: (circle one) Father Stepfather Guardian Date

Signature of: (circle one) Mother Stepmother Guardian Date